

Utah Behavioral Health Assessment & Master Plan: *Draft Results and Recommendations*



Project Phases



Environmental Scan

✓ 01

- 30 discussion groups or interviews - *to date*
- Close to 250 participants
- Comprise a diverse range of stakeholders and representation

Representatives from:

- Public providers, including local authorities, community health centers, and federally qualified health centers
- Private providers, including nonprofit providers, pediatricians, family care practice physicians, clinical practitioners, behavioral health treatment providers, psychiatrists, and residential and institutional providers
- Payers, including Utah's Accountable Care Organizations, the state's health insurance plan, commercial payers, and HDHP reps
- Providers of promotion and prevention services
- Crisis services
- Recovery and treatment supports
- Health systems
- State agencies
- Education (both K–12 and higher education)
- Court, criminal, and juvenile justice systems
- Employer representatives
- Law enforcement (TBD)

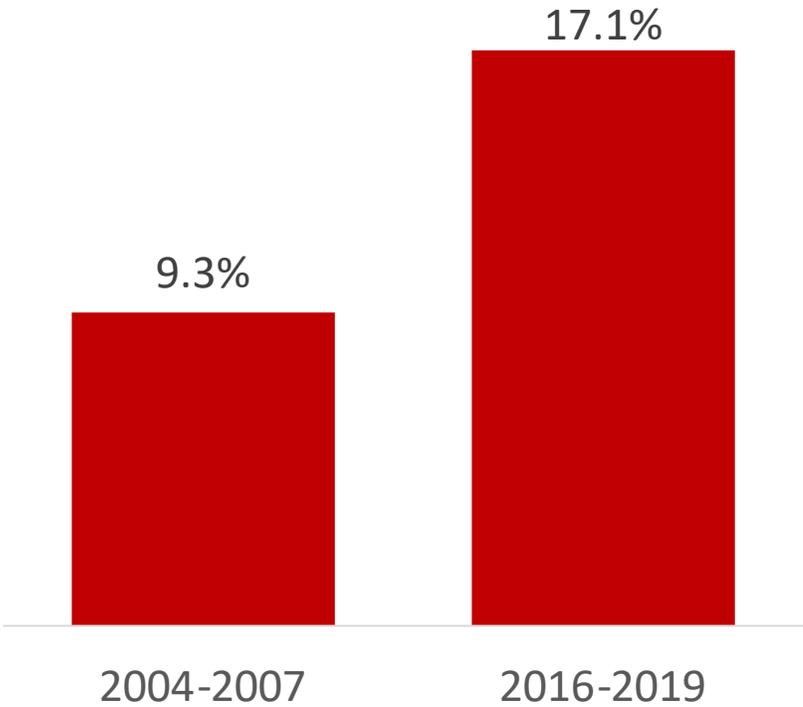


Environmental Scan

✓ 01

The annual average percent of youth aged 12–17 that experienced a Major Depressive Episode (MDE) in the past year almost **doubled over a twelve-year period.**

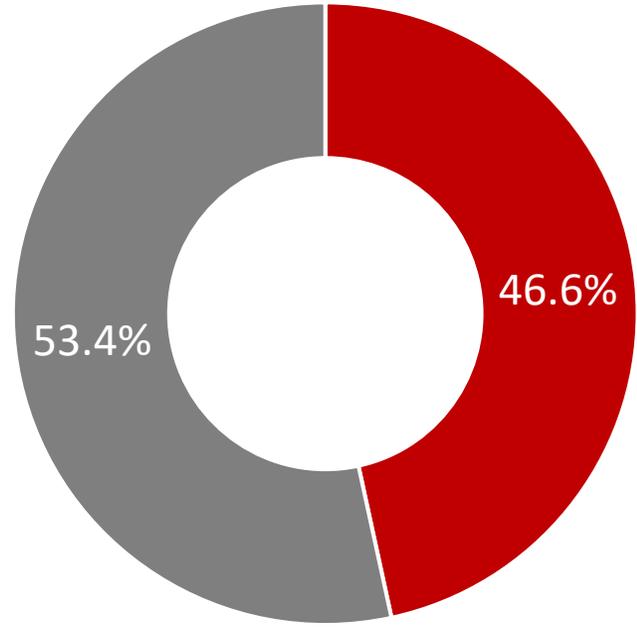
Utah’s percent is also higher than the national average (14.0%).





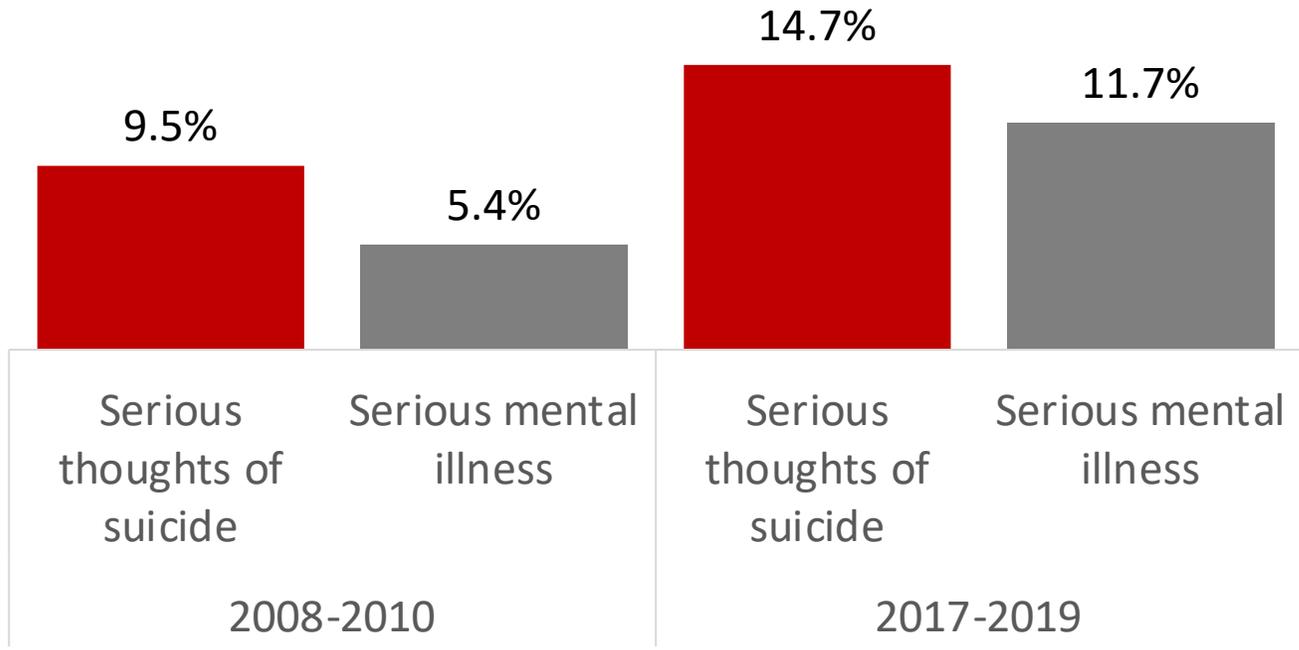
Of these youth, **less than half** received depression care in the past year.

This indicates there were around **27,000 youth in Utah** who did not receive treatment.



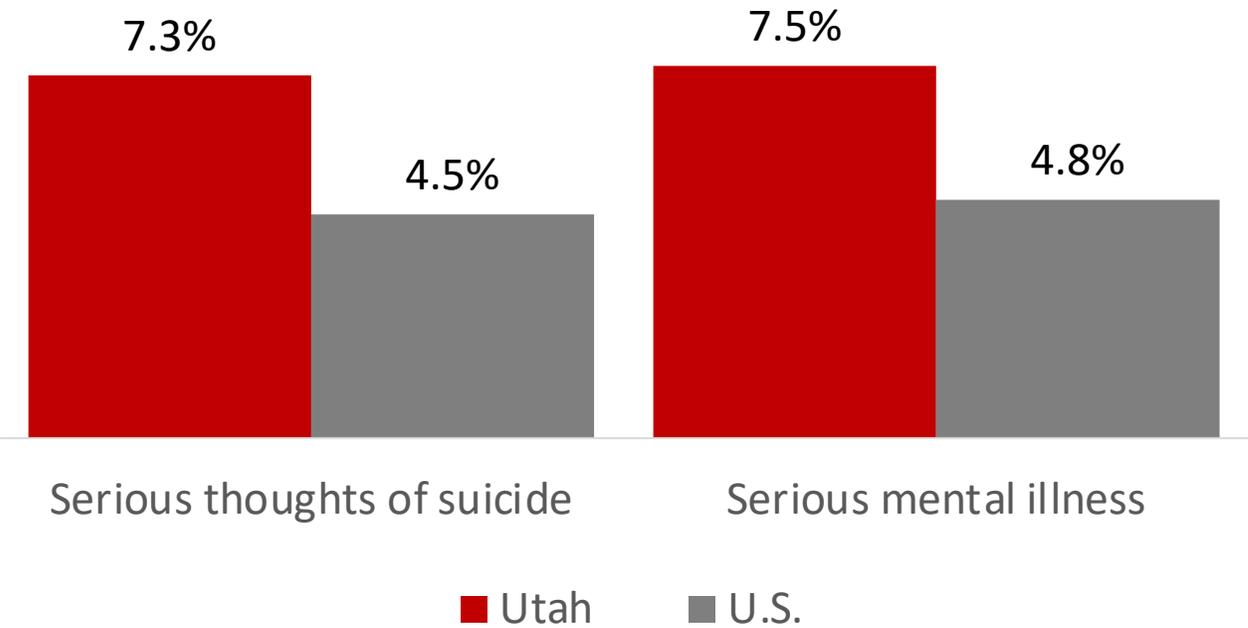


The percent of young adults with **serious thoughts of suicide** and **serious mental illness** has also increased.





7.3% of adults aged 18 or older have serious thoughts of suicide and **7.5% of adults** have serious mental illness.

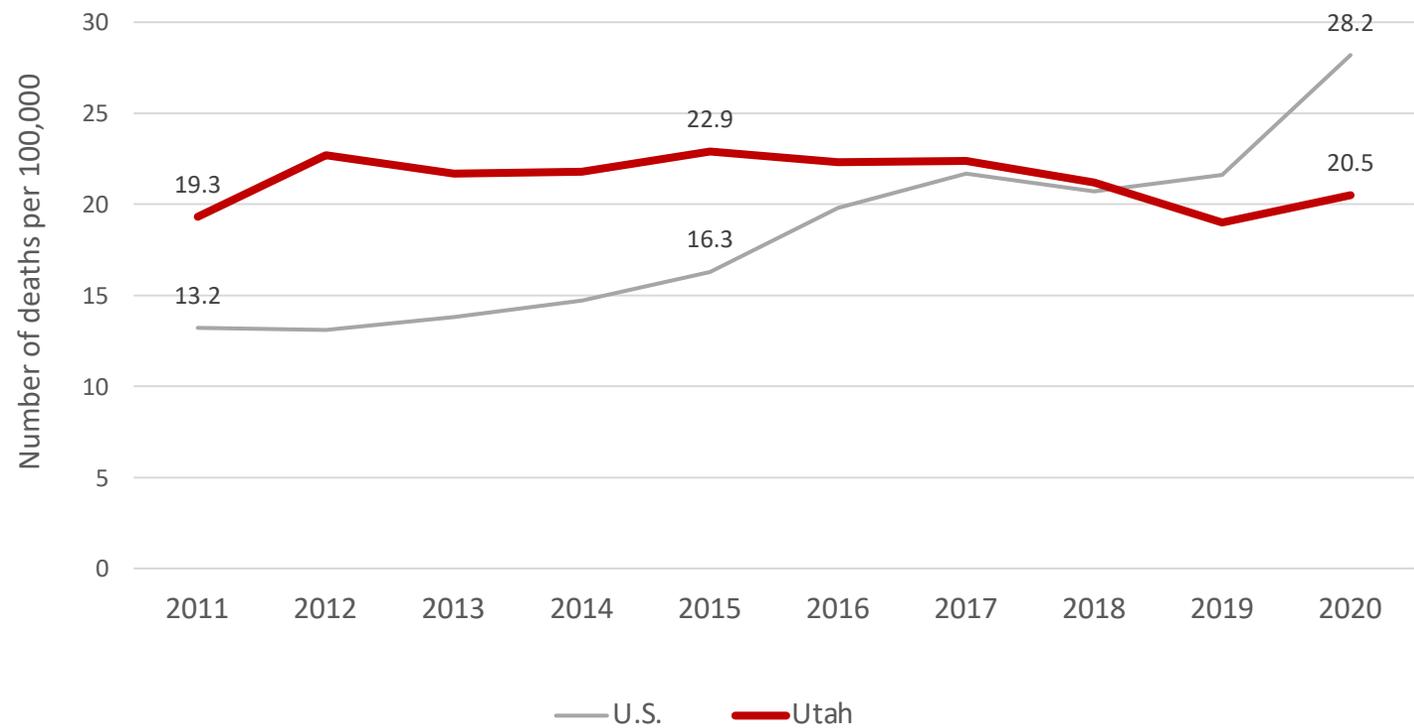




Total drug-related fatalities in Utah are increasing again.

The main drivers are **fentanyl** and **methamphetamine**.

Total drug-related fatalities in Utah and the U.S., 2011-2020

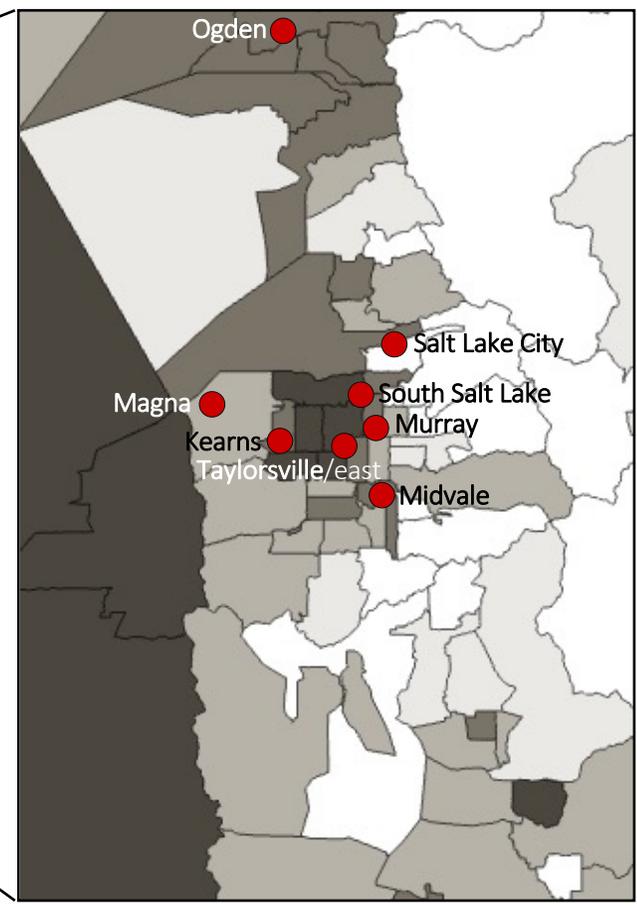
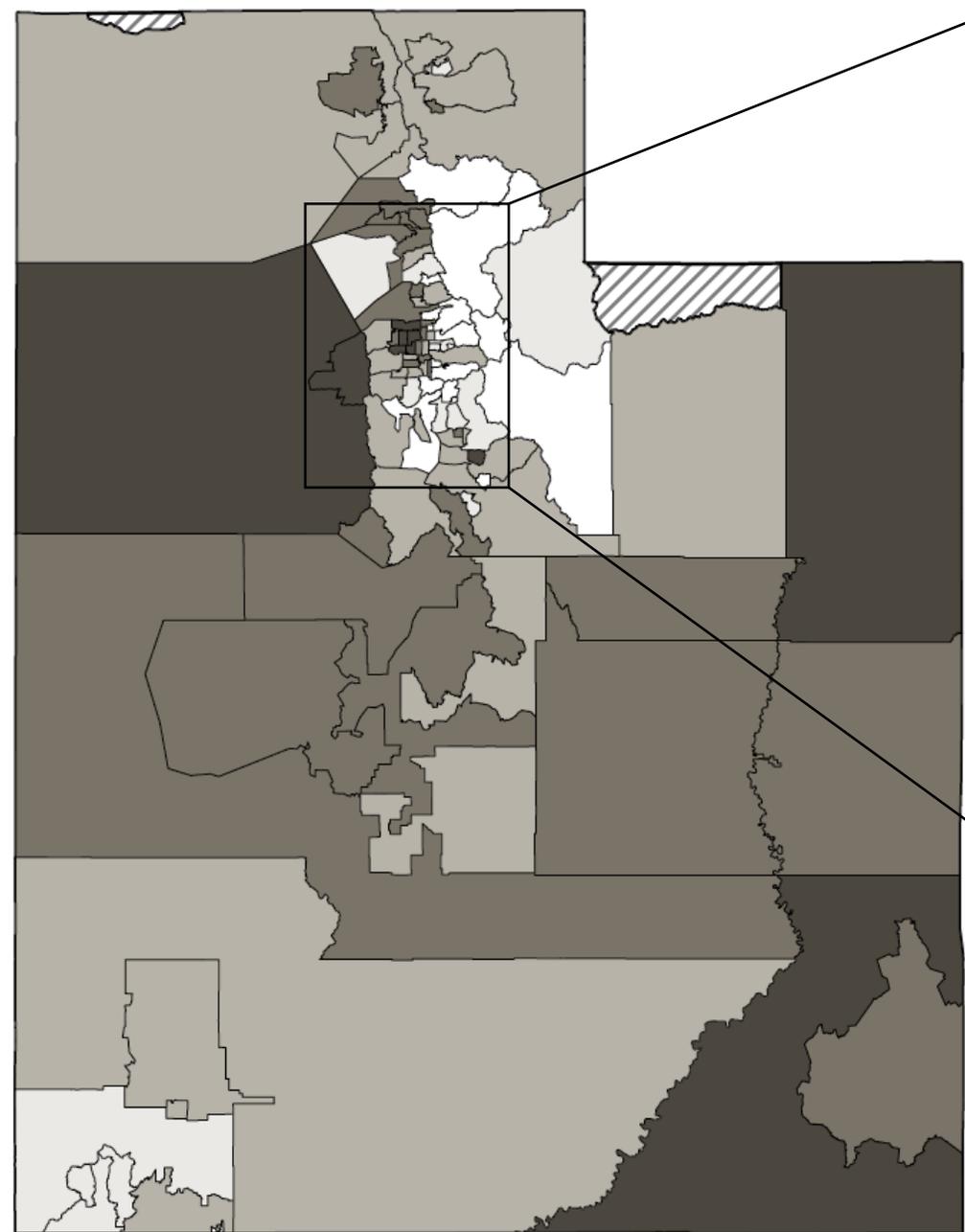


Note: Total drug-related fatalities include those coded as unintentional, suicide, homicide, or undetermined intent. Source: Utah Department of Health and Human Services, Indicator-Based Information System for Public Health.



Environmental Scan

Utah Small Areas that consistently rank high across select mental health indicators



Assessment



02

Key Findings

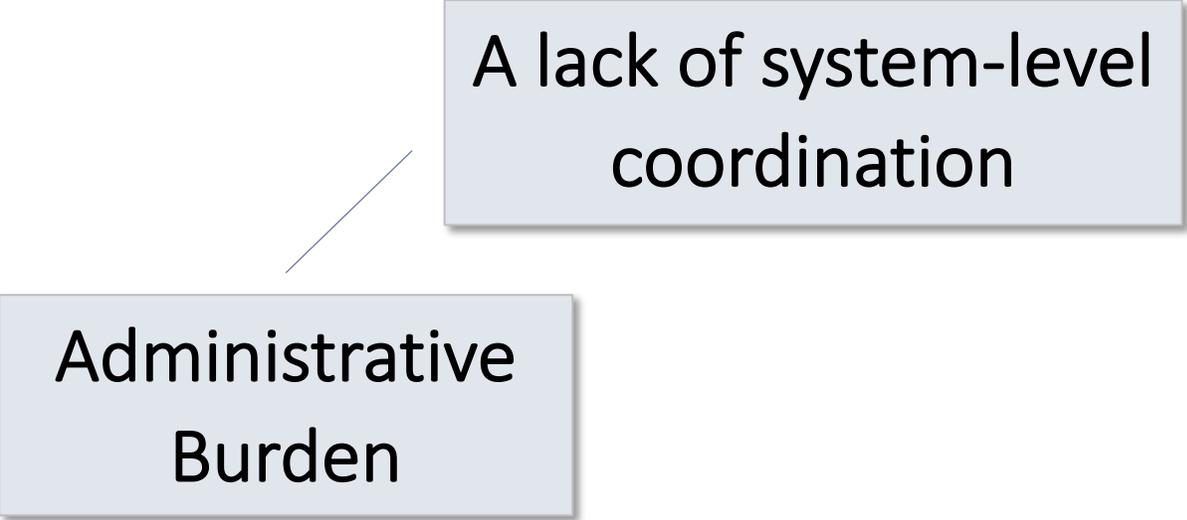


System-Level Issues

A lack of system-level
coordination

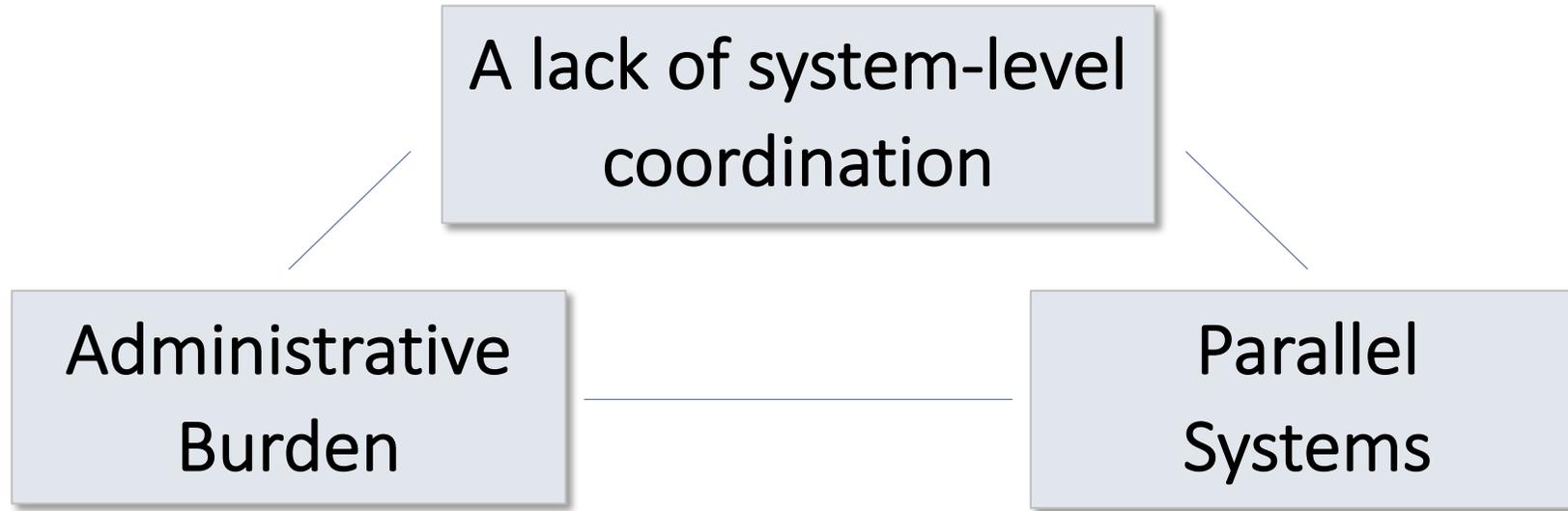


System-Level Issues



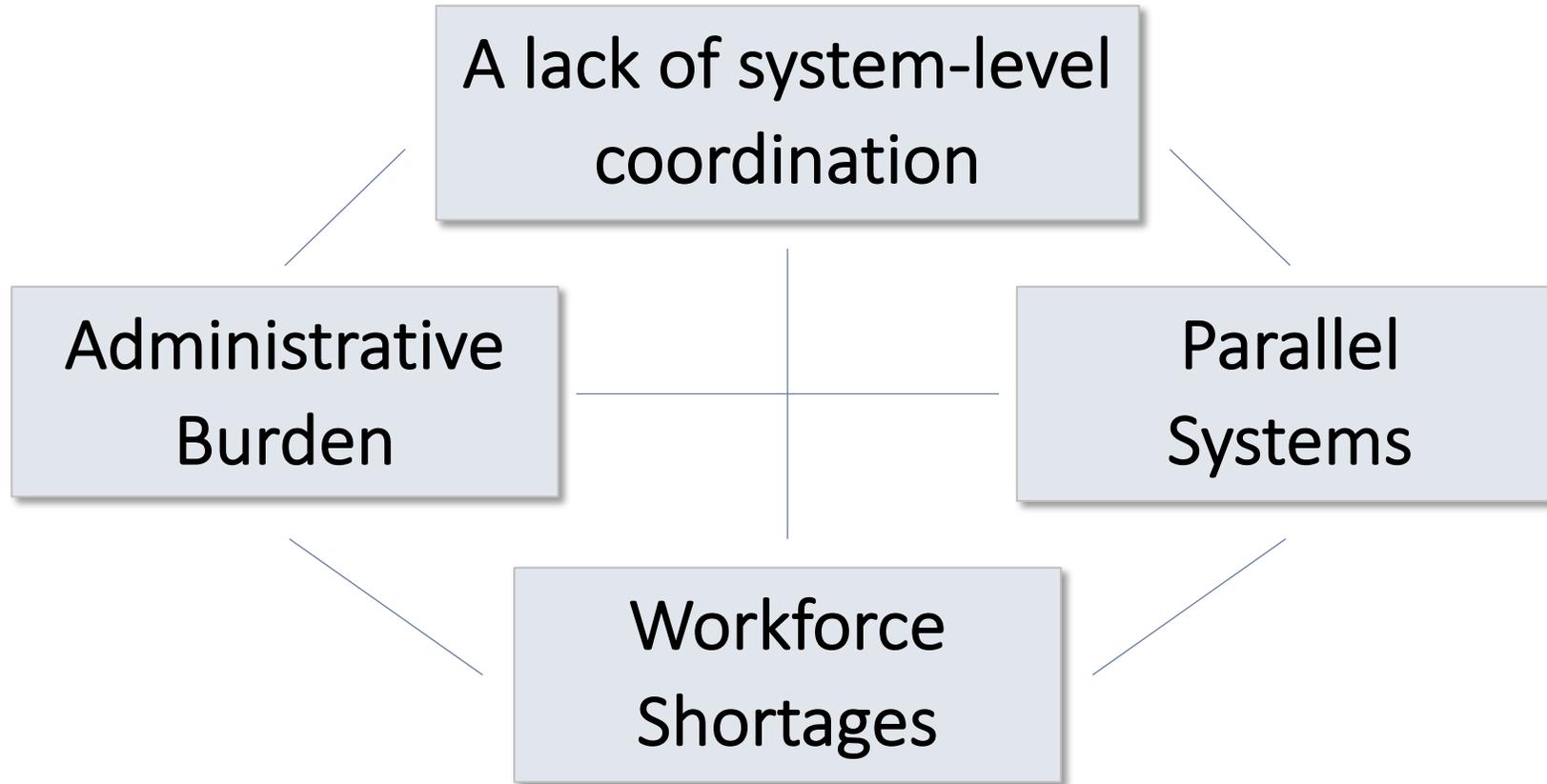


System-Level Issues





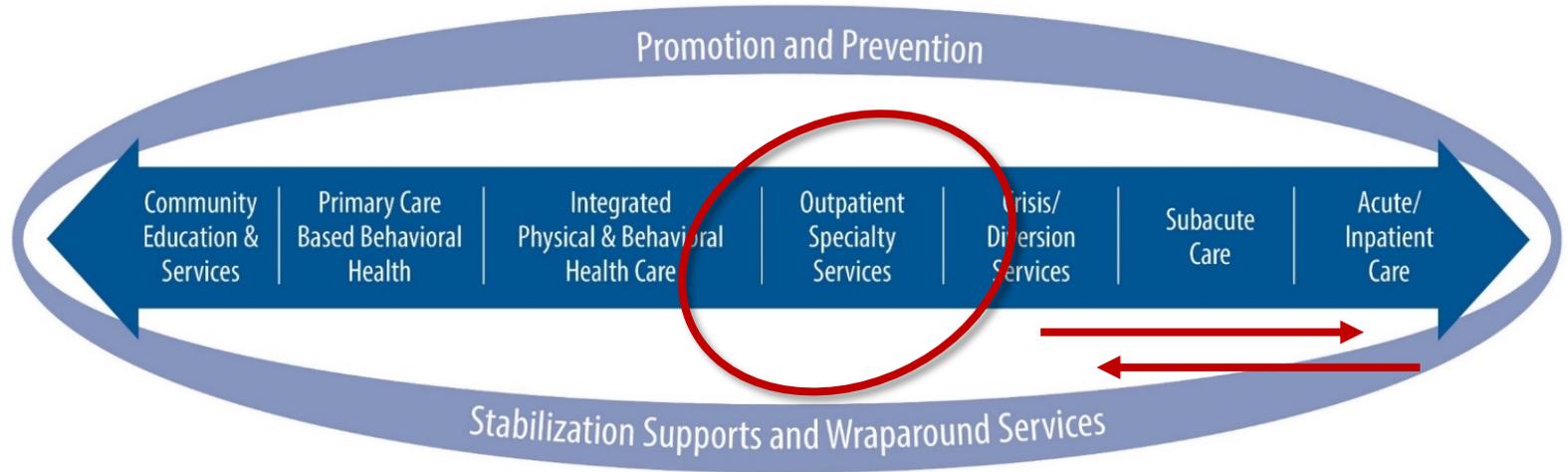
System-Level Issues





System-Level Issues

Workforce Shortages



“We need to fix the back door.”

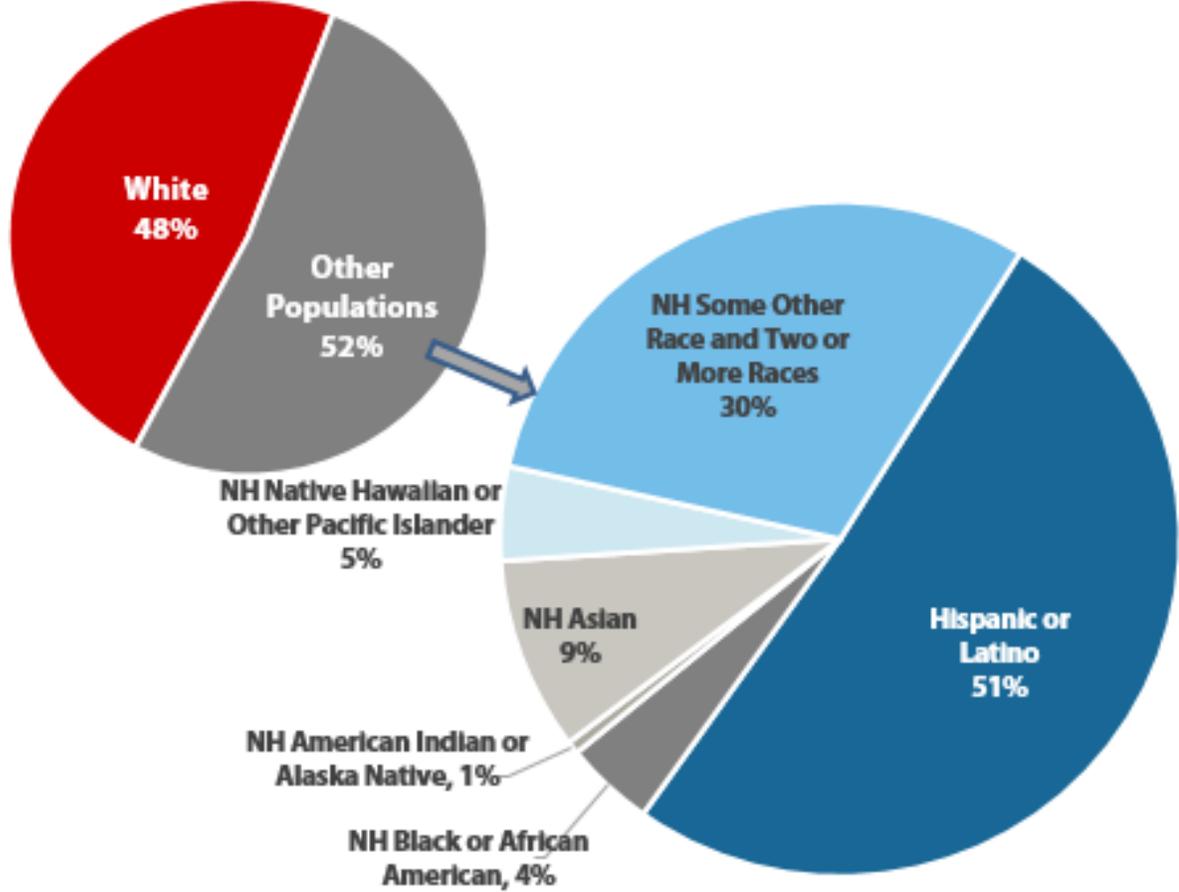


System-Level Issues

Workforce Shortages

- Providers across all licenses/specialties
- Culturally and linguistically competent providers
- Providers qualified to treat patients with co-occurring ID/DD

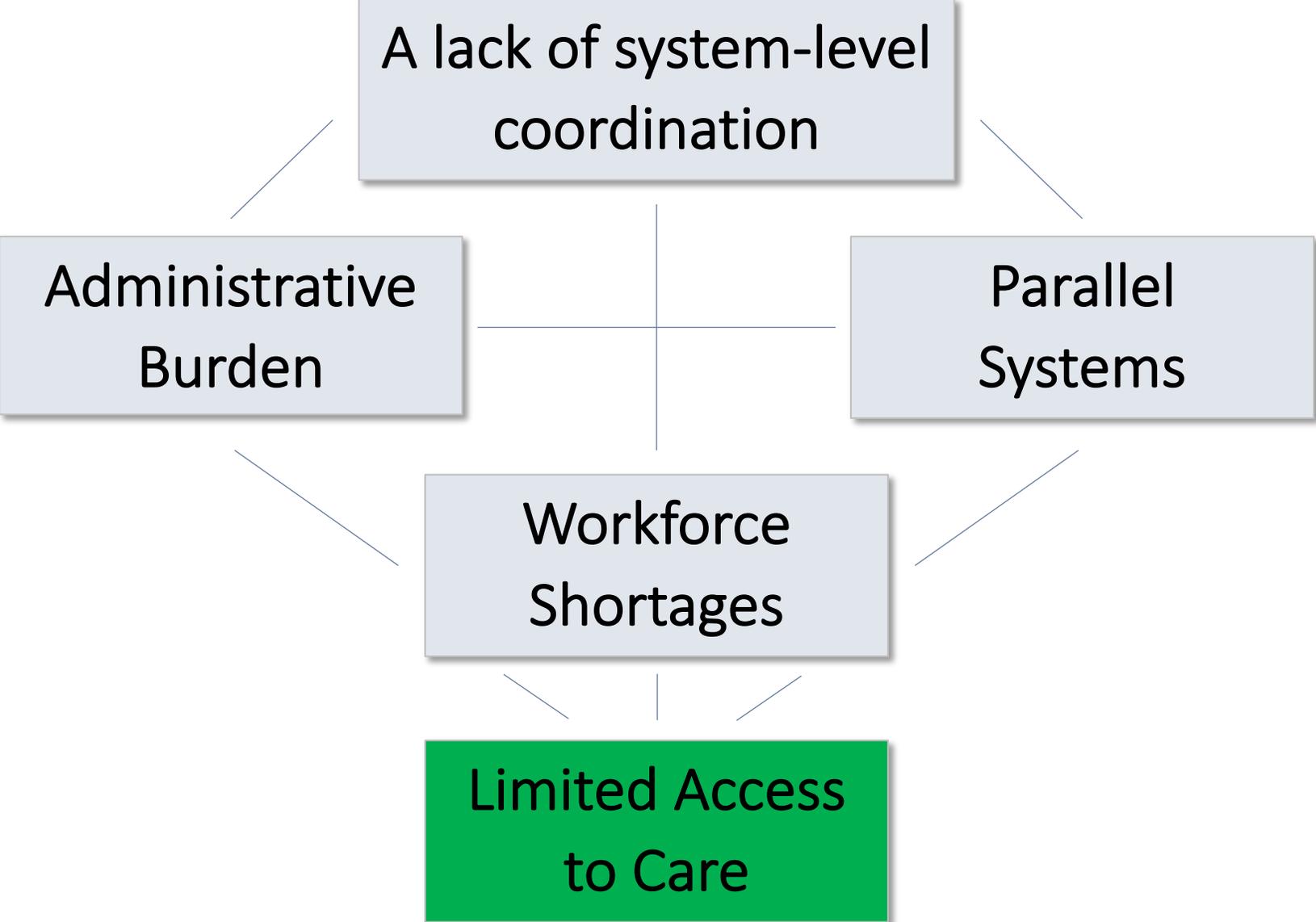
Contributions to growth by racial and ethnic populations, 2010-2020



Source: U.S. Census Bureau, Redistricting Data Files (2010 and 2020)

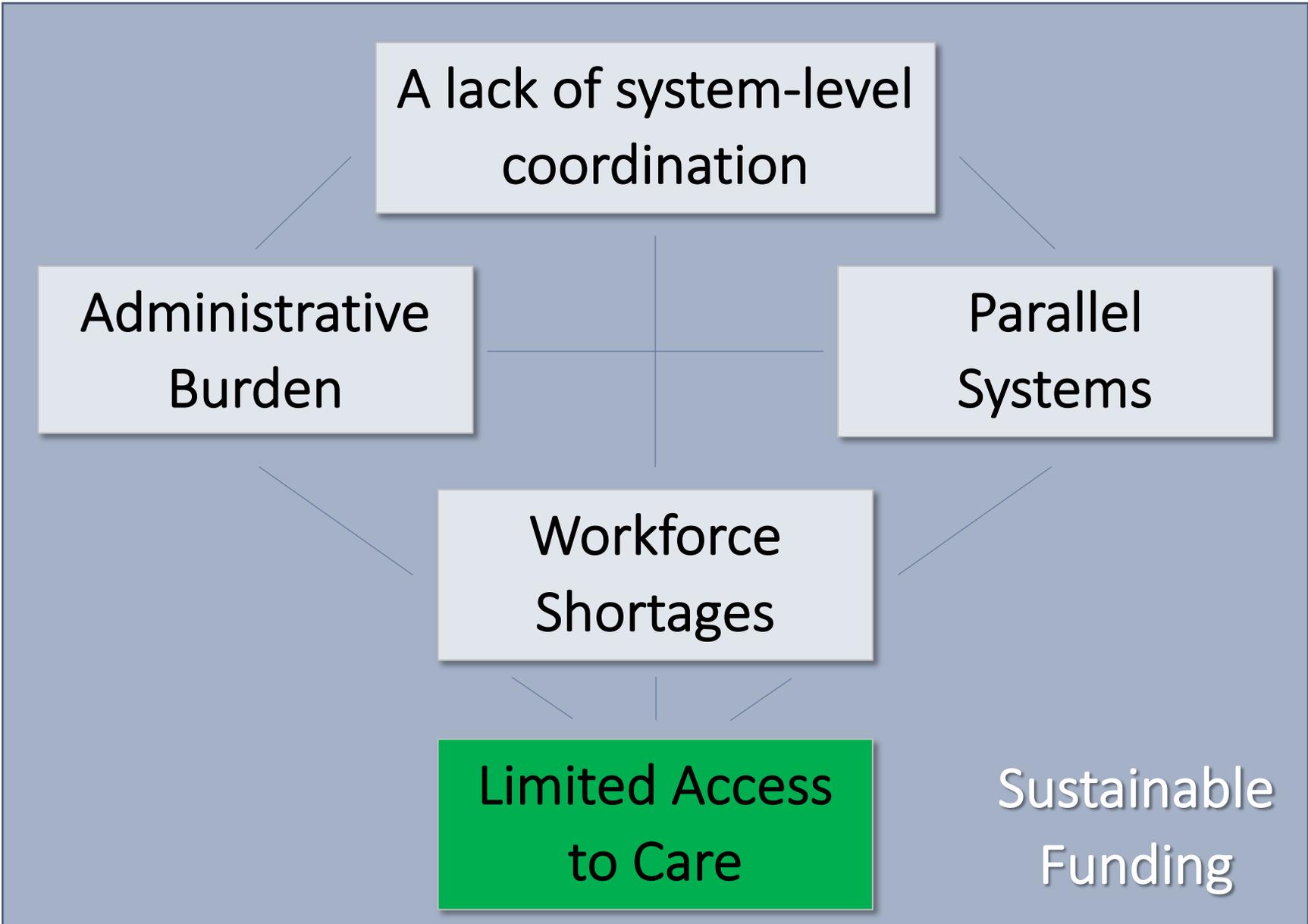


System-Level Issues





System-Level Issues

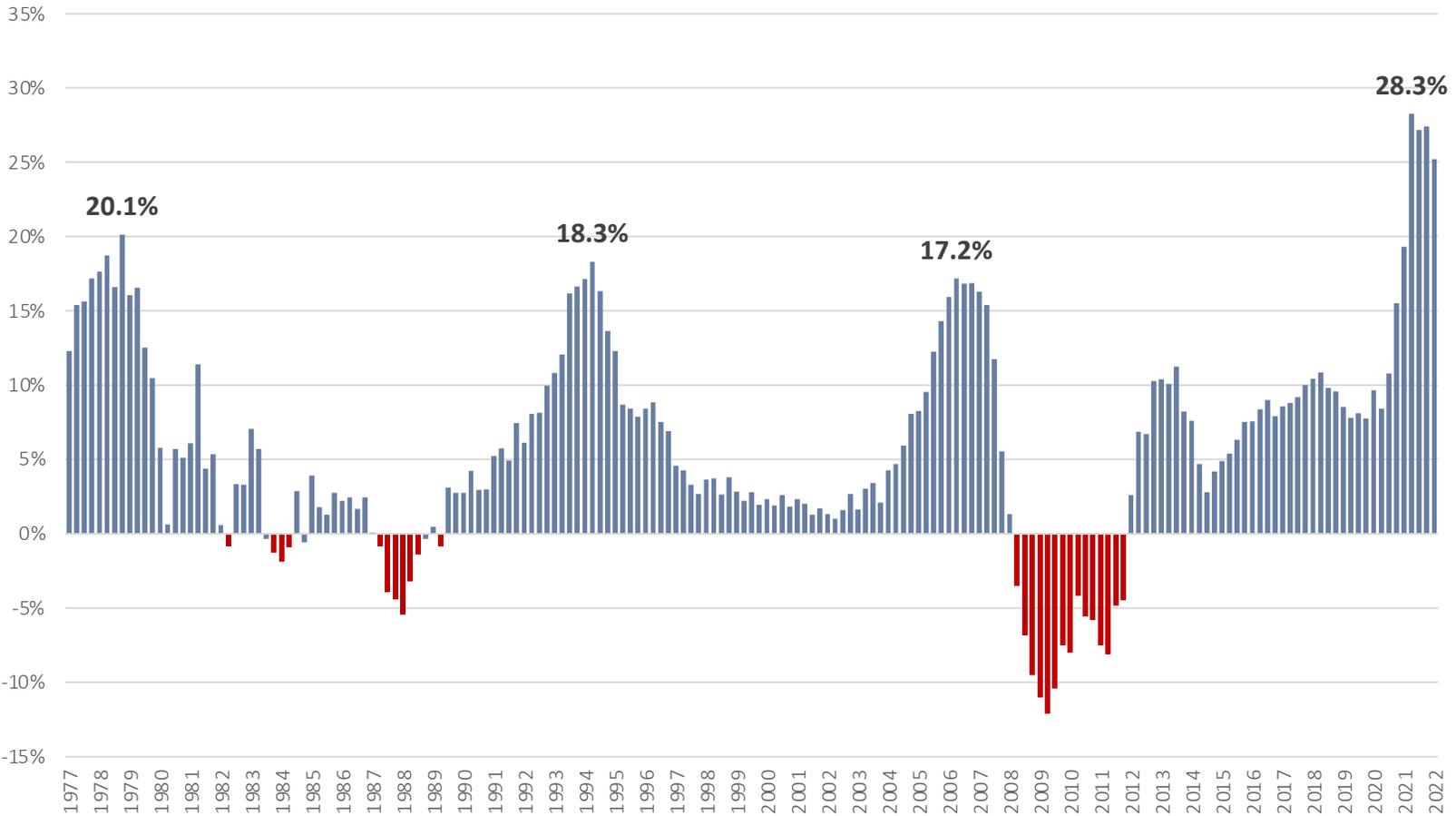




Other Key Findings (a sample)

#1 Issue Mentioned in Groups/Interviews:
Housing

Year-over Quarterly Percent Change in Utah's Housing Price Index (single-family homes)



Source: Federal Housing Finance Agency, purchase only transactions.



Other Key Findings (a sample)

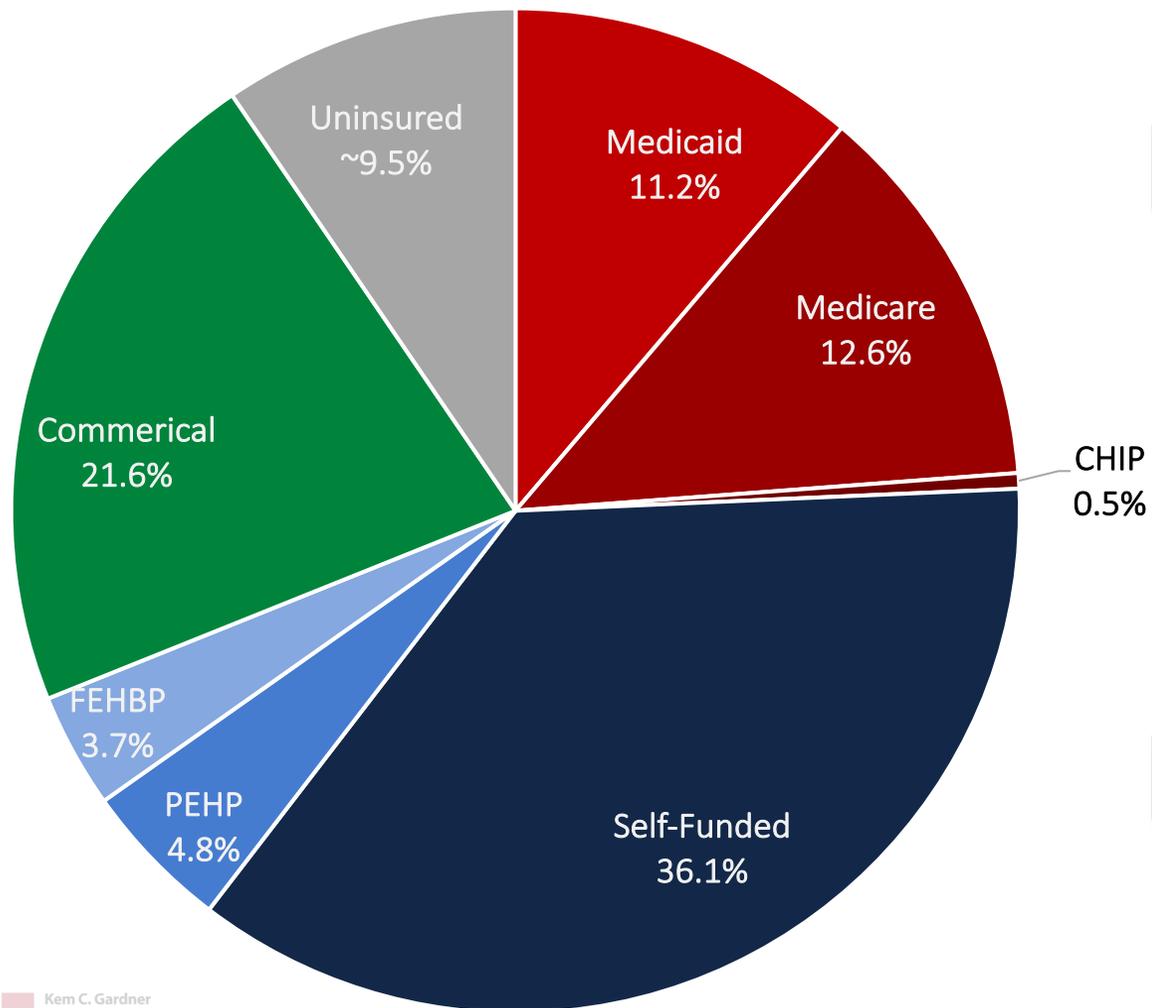
- Address housing (disrupting care across the continuum)
- Improve funding and coordination of promotion, prevention, and early intervention activities.
- Increase primary care-based behavioral health services.
- Improve continuity of care in Medicaid.
- Improve access to services for persons with co-occurring conditions, particularly ID/DD and ASD.
- Improve access to rural-area crisis services.
- Support patient-level care coordination, transition support and patient navigation.

Bright Spots

- Examples of local coordination (e.g., LMHAs)
- Expansion of MCOTs and receiving centers
- Peer support and other non-clinical care team members
- SUMH's multi-cultural affairs grant
- Utah Crisis Response Commission



Utah's Health Care Coverage Landscape



High Deductible Health Plans



Direct-to-Consumer Market





Next Steps

- Finalize guiding principles, strategic priorities, key decisions, and recommended continuum changes
- Prepare draft Master Plan
- Circulate draft with stakeholders and the public
- Review and incorporate feedback
- Prepare and present final Master Plan