

Incorporating Addiction & Mental Health Providers into the Nation's Health IT System

The Behavioral Health Information Technology Act of 2011 (S. 539) would extend financial incentives for adopting health information technology (HIT) including electronic health records to mental health and addiction treatment providers and facilities. This legislation was originally introduced in 2010 by Senator Sheldon Whitehouse and cosponsored by a bipartisan group of 12 Senators, but unfortunately, the bill did not make it through the legislative process before Congress adjourned. Sen. Whitehouse (D-RI) re-introduced the bill on March 10, 2011.

BACKGROUND

Establishing an interoperable system of electronic health information is critical to encouraging greater care coordination among addiction, mental health, and other healthcare providers as well as to increasing engagement of consumers in managing their own care. Both of these goals are key to improving treatment outcomes and overall health.

Individuals with mental health and substance use conditions are in dire need of more coordinated, integrated healthcare. Some 40% of individuals with mental health problems initially seek care in primary care settings, but studies consistently find that over half of individuals with significant mental health conditions do not receive adequate mental healthcare. A series of recent studies consistently show that persons with serious mental illnesses who are clients of the public mental health system die sooner than other Americans and have an average age of death at 52, due to other health conditions like diabetes and heart disease, which are not adequately treated or managed. **Greater use of electronic health records has tremendous potential to change those outcomes by improving care coordination and overall quality of care.**

In recognition of the importance of HIT, The Health Information Technology for Economic and Clinical Health (HITECH) Act was enacted as part of the American Recovery and Reinvestment Act in January of 2009. It creates new Medicare and Medicaid reimbursement incentives to encourage a wide array of providers to adopt and utilize electronic health records. **While the provisions of the HITECH Act are meant to promote widespread adoption of HIT to increase healthcare quality, reduce medical errors, and promote care coordination, this cannot be accomplished without fully incorporating addiction and mental health services.**

SOLUTION

S.539 addresses these issues and expands HITECH Act provisions in three important areas. S.539:

- Clarifies the definition of "health care provider" throughout the HITECH Act to include behavioral and mental health professionals, substance abuse professionals, psychiatric hospitals, behavioral and mental health centers, and substance use treatment facilities.
- Establishes grants for those mental health treatment facilities not eligible for meaningful use incentives through the HITECH Act, which allow for the purchase of certified electronic health records (EHRs), to train medical staff in the use of EHRs, and improve the exchange of health information between mental health providers and other health care providers.
- Extends Medicare and Medicaid reimbursement for meaningful use of EHRs to clinical psychologists and clinical social workers who provide care at addiction and mental health treatment organizations.

REQUEST: Please co-sponsor the Behavioral Health Information Technology Act (S. 539)