

Solving the NH Behavioral Health Workforce Crisis

A Collaboration Among:



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Introduction

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- Workforce shortages in New Hampshire's behavioral healthcare sector have reached alarming levels and have stayed at these levels for nearly a decade.
- Despite heroic efforts from leaders from all sectors, many individuals in NH who are in clear need of behavioral health support, are not getting sufficient help.
- There are many 'bright spots' in NH's quest to improve support for behavioral health statewide.

All efforts have been significantly constrained by shortages of qualified staff.

NH BH Solution Session

- Over 100 senior leaders representing diverse perspectives from multiple government agencies, healthcare providers, academic institutions, law enforcement and justice, philanthropy, public health, peer support, workforce development, employment security, staff licensure, and several collaborative efforts came together in Plymouth.
- The goal of the day was to be **clear eyed** about the state of the workforce and to get to **work on solving it differently**.
- Cross-sector team spent the day working through the hardest parts of the workforce challenge by
 - bringing forward hard-earned learnings
 - identifying cruxes to overcome
 - generating breakthrough ideas

Report out

The resulting report highlights the findings from the solution session alongside learnings from the NH Behavioral Health Workforce Center at Dartmouth Health and provides a shared path forward.

The report is divided into 2 sections:

- Part 1 – Prepare a BH labor market that has the gravitational pull to attract and retain highly skilled and qualified BH staff.
- Part 2 – Find, attract, prepare, and retain workforce

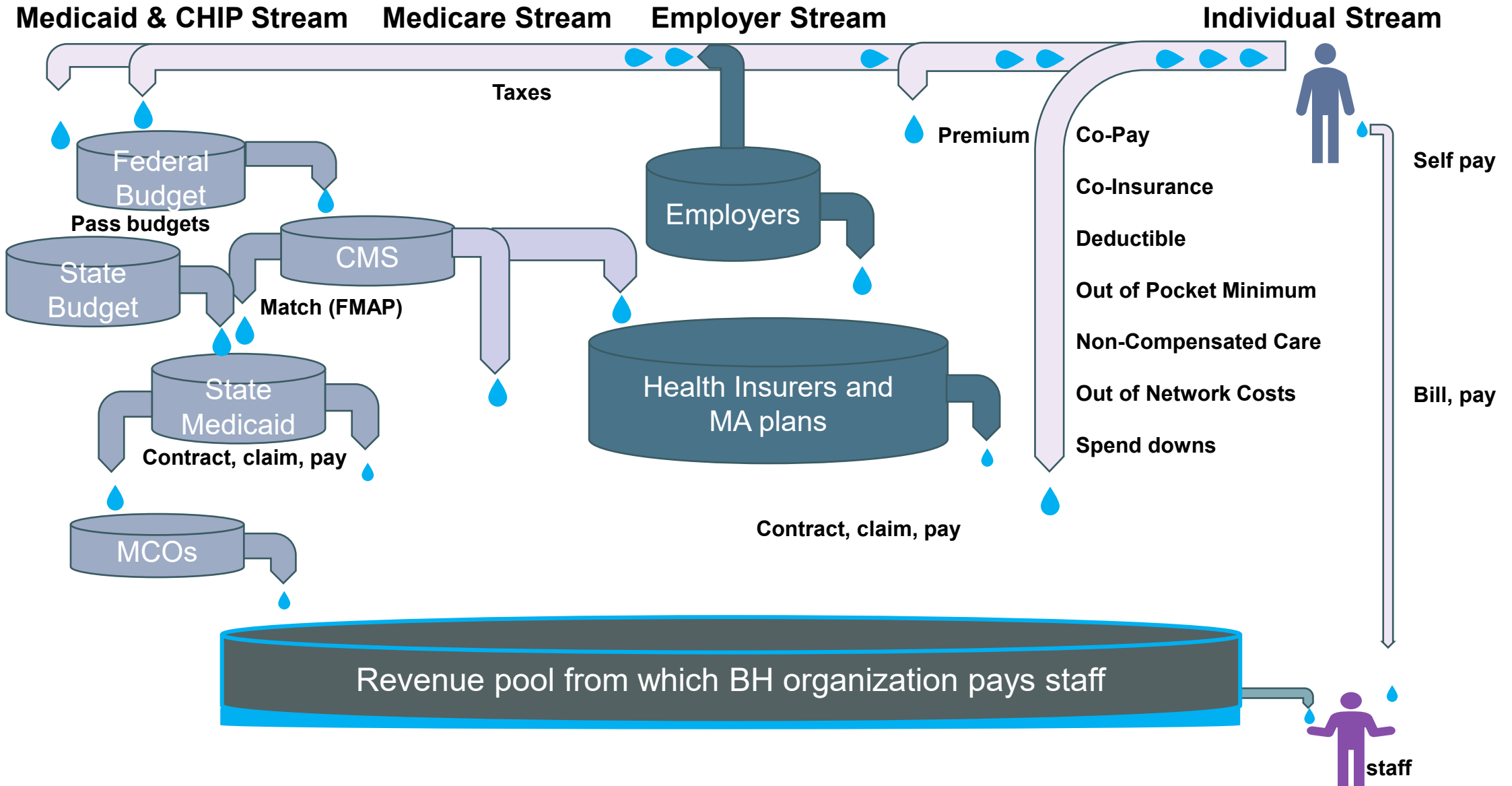
Part 1 – Prepare a BH labor market that has the gravitational pull to attract and retain highly skilled and qualified BH staff.

Begin with our strengths and assets

Collectively promote NH as the best place to train and work in BH

Do the hard work to correct our weaknesses at all levels – this is detailed, difficult change at all levels and requires shared interest and collaboration

Oversimplified picture of revenue streams for healthcare labor market



Action	NH Public / Awareness & Advocacy Orgs.	Representatives in Concord & Washington	Gov. Agencies	Health care Payers	Health care Orgs.	Philanthropy & Associations
Collectively invest in the promotion of NH as the best place to train and work in Behavioral Healthcare.	X	X	X		X	X
Sound the Alarm! NH's Behavioral health labor market is in a downward spiral.	X	X	X	X	X	X
Curate a single source of data, information, and inclusive messaging regarding the NH BH Labor Market to be used by leaders to align public support and take legislative action.	X	X	X		X	X
Allocate sufficient funding for BH in Federal and State budgets and legislation.	X	X	X			

Action	NH Public / Awareness & Advocacy Orgs.	Representatives in Concord & Washington	Gov. Agencies	Health care Payers	Health care Orgs.	Philanthropy & Associations
Take every opportunity to simplify the existing healthcare payment system. Seriously consider 'value vs. burden' before adding any additional complexity.		X	X	X	X	
Embrace federal, state, and private payer payment reforms (e.g., Prospective Payment, Bundled Payment, Capitation) and leave behind legacy complexity (e.g., "shadow billing") when transitioning to simpler value-based payment systems.		X	X	X	X	
Review state matching fund sources for fitness, durability, and sufficiency. Make improvements and add revenue sources where feasible.	X	X	X			
Continue to monitor and maximize enhanced federal funds participation opportunities to draw down more federal funding.			X			
Continue to pursue federal grant and waiver opportunities to supplement revenue.			X		X	
Make market corrections for staff wages through rate setting routines.			X	X	X	

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Conduct value assessment of MCOs in Behavioral Healthcare and make improvements.		X	X	X		
Streamline contracting among 3 MCOs and Provider organizations.			X	X	X	
Align MCO incentives with Behavioral Health of their Members.		X	X	X		
Let Health Insurers know that comprehensive multi-level BH care is important to their customers (Employers, Members) and to the state and request plan improvements.	X	X	X	X	X	
Compel Health Insurers to remove artificial barriers to BH care.	X	X	X	X		
Encourage Health Insurers to embrace payment simplification and value-based payment.	X	X	X	X	X	
Provider Organizations work with upstream partners to simplify non-competitive elements of contracts, payment, and reporting requirements – then reduce administrative overhead.			X	X	X	

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Find and formalize additional shared services among provider organizations for economies of scale/cost and shared expertise.					X	
Continue to invest in technology that improves care provision for individuals, improves work for staff, and improves efficiency and costs for organizations.			X		X	
Continue to support statewide technology investments using enhanced match federal MMIS funds.			X		X	
Support and incentivize integrated care as piloted through the Medicaid 1115 waiver.			X	X	X	
Work directly with cities, towns, and counties to attract and retain well-paid professionals and their families by reducing barriers to work.	X	X	X		X	X
Support statewide and local efforts to increase affordable housing.	X	X	X		X	X
Restructure payment to encourage efficient care delivery by flexible optimized cross-disciplinary teams.			X	X	X	
Find and eliminate charting requirements that have low value high burden.			X	X	X	

Part 2 – Find, attract, prepare, and retain workforce

Help colleges and universities attract and prepare candidates for NH BH positions

Help BH Organizations attract and support Peer Paraprofessionals, people in recovery from mental illness and/or substance misuse, and people with criminal records as valued members of their teams

Help BH Professionals clinicians *return to service* from private practice

Encourage inbound migration of BH workforce / discourage outbound migration

Utilize telehealth to gain access to more BH staff

Utilize gig workers for some BH care

Reduce demand for clinical services by encouraging patients to utilize technology applications

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Join forces to attract and retain workforce together for the entire state.	X	X	X		X	X
Work closely with feeder schools to build student awareness, chart career pathways, teach real world skills, create real opportunities for practice, and reduce financial barriers.	X		X		X	X
Consider paraprofessionals as valuable additions to BH teams and build organizational systems and culture to hire and support non-traditional roles.	X	X	X	X	X	X
Entice licensed clinicians to return to community practices that serve Medicaid clients by providing highly competitive wages and benefits, insulation from administrative burden, flexibility, autonomy, and a strong culture of community service.		X	X	X	X	
CCBHC will cost more so prepare to raise sufficient state funds to match federal funds (35 c. state funding earns \$1 total) to support NH CCBHCs demonstration.		X	X		X	
Create <i>fully-loaded</i> career pathways that meet the needs and goals of BH staff, draw them to NH, and help them to lay down roots and stay.	X		X		X	X
Create training and work opportunities for foreign students and staff and new Americans.	X	X	X		X	
Offer <i>sweeteners</i> such as loan forgiveness and financial incentives to draw talent.		X	X		X	X

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Find and solve the remaining licensure, state rule, and payment barriers to cross-state care delivery via telehealth.		X	X	X	X	
Identify BH roles that are appropriate for <i>gig workers</i> and develop infrastructure for qualifying, engaging, supervising, and paying this supplemental workforce.			X	X	X	
Respond to competition for talent from national therapy platforms by offering current staff more flexibility and autonomy.					X	
Consider the national therapy platforms as backup referral options for step down and lower levels of community-based BH care.					X	
Continue to encourage partnerships among primary care, behavioral health, and community organizations to share in support individuals who are struggling.	X			X	X	X
Support individuals to use technology applications as part of their treatment, recovery, and prevention program or as they wait for care.	X				X	X

In Conclusion

The NH Behavioral Health workforce is in crisis.

- All of the easy solutions have been tried and exhausted.
- The remaining work is nuanced, complex, and challenging.
- There are pathways out of the crisis and all of them require valuing behavioral healthcare as a society and sharing the mission to shore up NH's systems of care. This is shared work requiring leadership from the federal and state governments, from across the entire healthcare value chain, from our partners in philanthropy and advocacy, and from those who educate and engage the public.
- It is in all of our shared interest to go to work on these actions together and to keep everyone engaged in collaborative problem solving and celebrating progress.
- The simplest indicators of success will be number of hired into the NH behavioral health labor pool as a whole and the number of staff retained.

Discussion Time