Voice of the Purchaser Survey on Behavioral Health Support Spring 2023 Survey Results







Summary & Methodology

National Alliance, in partnership with HR Policy Association and in conjunction with the Path Forward, conducted a survey to understand the perceived importance and performance of services received from behavioral health service providers, including health plans. The survey gauged concerns and views of employers around the following:

- Equitable Access
- Quality of Care
- Integration of Behavioral Health into Primary Care
- Workplace Mental Health Support

The survey, including key purchaser expectations, was developed via an iterative process through feedback and insights from employers, coalitions, the Path Forward Steering Committee, and others. Survey responses were then collected from February to March 2023 using the online survey platform Qualtrics. Respondents could select up to five service providers to evaluate performance and had the option for each provider to indicate whether any specific requirement was out-of-scope or if they did not know how to evaluate (those responses were not included in the results). Respondents were also asked to provide qualitative comments on up to three key delighters and dissatisfiers for each provider.

The survey was distributed through National Alliance coalition members and the HR Policy Association resulting in a convenience sampling of 221 private and public employers from a variety of industries providing coverage for more than 10 million people across the country.

General attitudinal statements and importance ratings were evaluated overall (not at the service provider level). The performance results at the health plan/vendor level were only based on responses where employers chose to rate that dimension for that service provider. Average service provider ratings were only included where there was five or more ratings to a question.

Voice of the Purchaser Highlights:

Network access

- While 99% agreed that effective and timely access to in-network behavioral health providers is important, only 31% were satisfied; 31% expressed dissatisfaction with efforts to systematically identify and address gaps in network access; and 33% expressed dissatisfaction with efforts to help facilitate access for members having problems accessing timely behavioral health services
- Tele-behavioral health services were important to 95% of employers and 65% were satisfied with these services
- Only 34% of employers agreed that their behavioral health directories accurately reflect the providers available to plan
 participants, and 26% indicated dissatisfaction that their plan provides a directory that accurately reflects in-network behavioral
 health providers.
- 84% of employers agreed that behavioral health access and quality are as important as the financial management of behavioral health costs

Quality of care

- While 54% were satisfied with the promotion of standardized measurement for behavioral health services, only 33% were satisfied with engagement and reporting of behavioral health outcomes
- Monitoring appropriate prescribing of behavioral health medications relative to patient outcomes was important to 94% of employers and 41% indicated being satisfied with performance in this regard
- 43% of employers were satisfied that their service providers administered denials that were clinically justified and sensitive to patient needs

Voice of the Purchaser Highlights:

Integration of behavioral health into primary care

- 84% agreed that it was important that plans support, promote and incentivize integration of behavioral health into primary care, but only 28% were satisfied
- 64% agreed that early identification through broad use of behavioral health screenings can mitigate the severity of mental health issues

Workplace mental health support

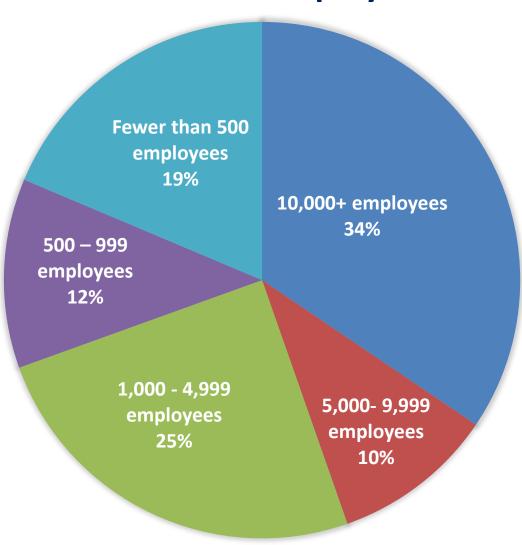
- Achieving high engagement in workplace behavioral health programs was important to 92%, but only 39% were satisfied
- Providing behavioral health awareness and stigma reduction programs was important to 89% and 40% were satisfied that their vendors were meeting these needs

Health equity and whole person health

- Only 27% of employers were satisfied that their service providers evaluate and tailor behavioral health services to diverse communities (e.g., LGBTQ+, People of Color)
- Only 14% of employers were satisfied with service provider support of whole person program integration through data and process coordination

221 Total Respondents

Number of Employees



Coalitions with 5 or more employer member responses

- Dallas/Fort Worth Business Group on Health
- Florida Alliance for Healthcare Value
- Greater Philadelphia Business Coalition on Health
- HealthCareTN
- Kansas Business Group on Health
- Lehigh Valley Business Coalition on Healthcare
- Mid-America Coalition on Health Care
- Midwest Business Group on Health
- North Carolina Business Group on Health
- Northeast Business Group on Health
- Pittsburgh Business Group on Health
- St. Louis Area Business Health Coalition
- Washington Health Alliance

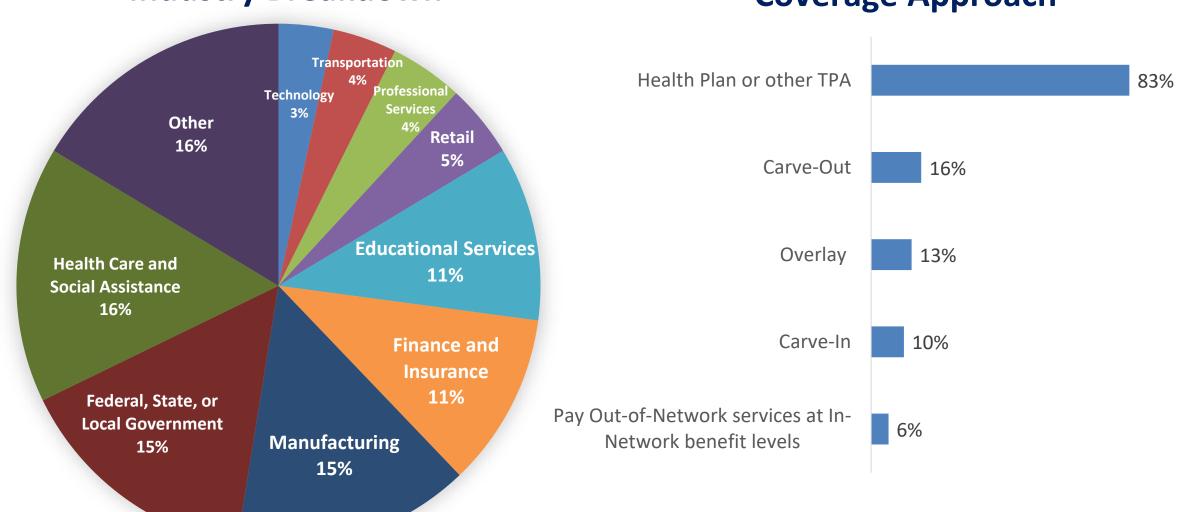
Vendors and health plans with 5 of more responses

- Other non-Health Plan (40)
- United Healthcare/Optum (37)
- Other Blue Health Plan (33)
- Aetna/Healthagen (32)
- CIGNA/Evernorth (32)
- Kaiser (25)
- Anthem/Carelon Behavioral Health/Elevance Health (19)
- Other non-Blue Health Plan (14)
- Highmark (14)
- HCSC (13)
- Lyra (11)
- Capital Blue Cross (10)
- Magellan Health (9)
- Spring Health (6)
- Headspace (formerly known as Ginger) (5)
- Virgin Pulse (5)

Breakdowns by Industry & Approach to Covering Behavioral Health Services



Coverage Approach



Employer's Level of Agreement with Broad Market Statements

Behavioral health access and quality are as important as the financial management of behavioral health costs

Behavioral health should be integrated into Primary Care (e.g., Collaborative Care Model)

Early identification through broad use of behavioral health screenings (e.g., PHQ-9, GAD-7) can mitigate severity of mental health issues

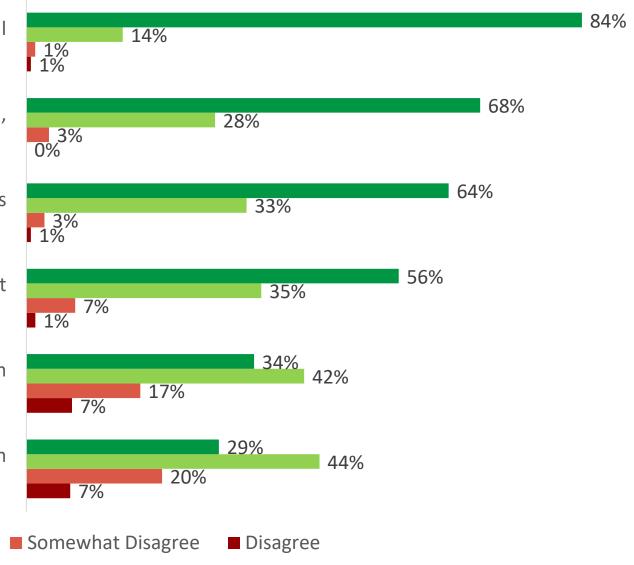
The rapid expansion of tele-behavioral health has made a significant improvement in behavioral health access

Our behavioral health provider directories are an accurate reflection of the providers available to our plan participants

Our plan participants are able to access in network behavioral health treatment in a timely manner

Agree

Somewhat Agree



Key Employer Comments:

Access

- "I would rank access and quality as even more important than financial management."
- "Lack of providers, even in metropolitan cities, is a struggle. Inpatient care is an even bigger struggle. Fighting to keep patients institutionalized is a struggle even with the large health plans."
- "Access to in-network mental health services through health plans is an utter failure. Access to critical mental health services, such as inpatient services, is even worse. We are failing as a country."

Tele-behavioral

- "Virtual care has been a great improvement in access to care, but in-person remains an important mode of treatment and is far less accessible both from an availability and in-network standpoint."
- "Very few participants are utilizing the telehealth option for mental health services (Our participants still like to see a provider in-person)."

Key Delighters

Behavioral support practices that exceed employer's expectations

- "Very happy with our on-site behavioral health support and also training sessions available to our managers and employee resource groups"
- "Collaboration with our EAP, availability of other programs that support members, and expansion of telemedicine with behavioral health"
- "Easy to manage copays for members, easy to find in-network providers"
- "Availability of no cost behavioral health telehealth services"
- "Patient management and ensuring that patient is followed up to ensure they are able to get an appointment with a provider"
- "Telehealth innovation ... integrated with chronic condition programs"
- "Have shown willingness to provide mental health access data"
- "Processes to treat post EAP visits as a network"
- "Efforts to pay network providers more and expansion of network"
- "In-network provider listing, in-network diverse provider listing, access to unlimited services"
- "Dedicated behavioral health line for members"
- "Assigning case managers"
- "Integration with primary and other types of care"

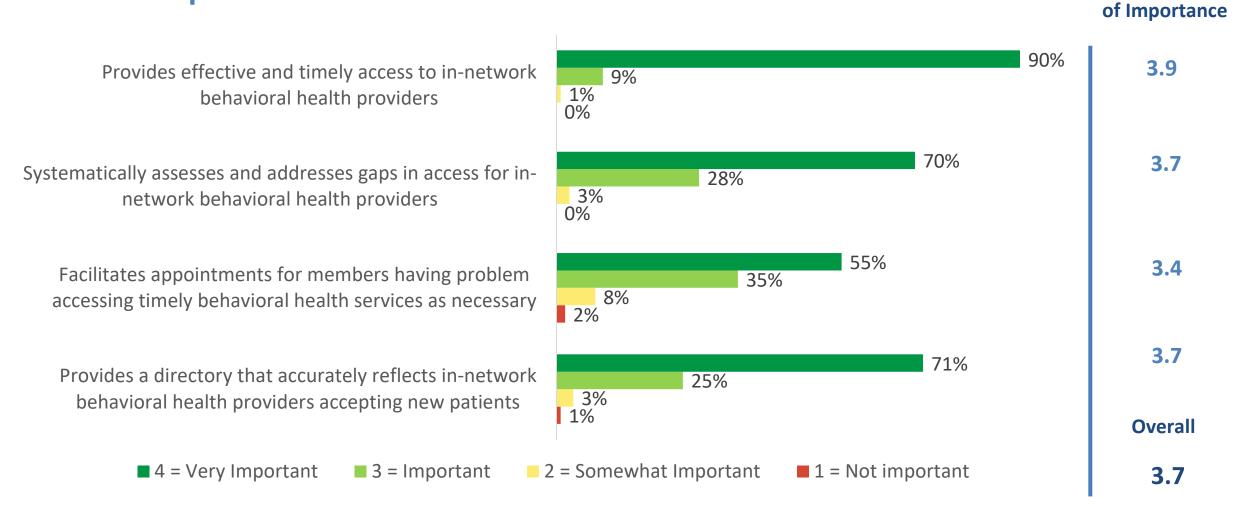
Key Concerns

Behavioral support practices where employer's expectations were not met

- "Scarcity of in-network care"
- "No outcomes reporting"
- "Medical/mental health integration for whole person care"
- "Network availability of providers, upkeep of directory, provider reimbursement"
- "Not as cutting edge as some of the disruptor models"
- "Provider access across insured populations"
- "Access to specialized in-network providers, not concerned with employer's concerns regarding lack of mental health care"
- "Time it takes for employees to get assistance"
- "Limited capabilities for a customized plan"
- "Lacks diverse provider list"
- "Mental health parity compliance"
- "Fully insured plan we receive almost no info; need to see what we can get access from vendor"
- "Providing outcomes data and incentivizing high quality providers"
- "Reporting and member support"
- "General wait times and access"
- "Wouldn't develop a smooth handoff from EAP to health plan; their answer was to switch to their EAP"
- "In Medicare, mental health copayments and coinsurances can be different than physical health; there needs to be parity"
- "Equity lens application"
- "Lack of new patient providers and lack of education"
- "Collection of race/ethnicity for behavioral health providers has stalled at 56%; need more reporting on where the gaps are and what they're doing about recruiting providers of color"

Network Access

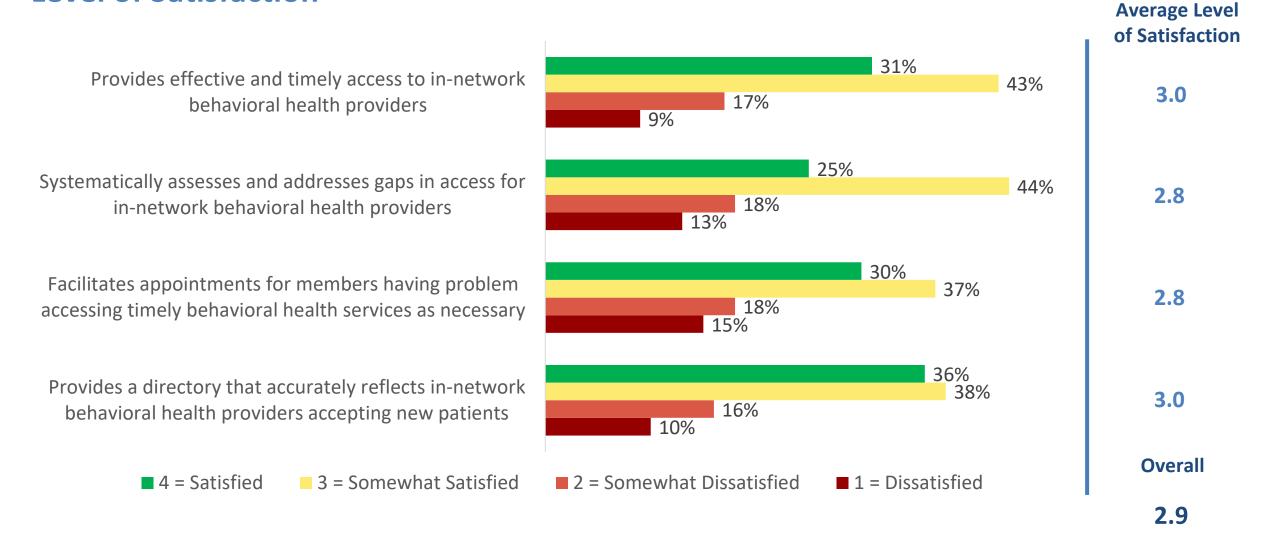
Level of Importance



Average Level

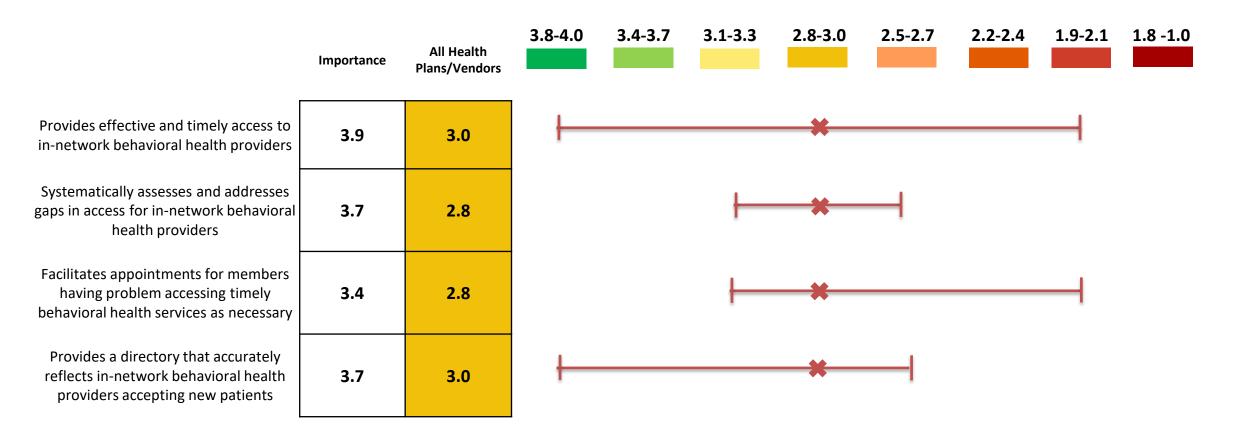
Network Access

Level of Satisfaction



Network Access

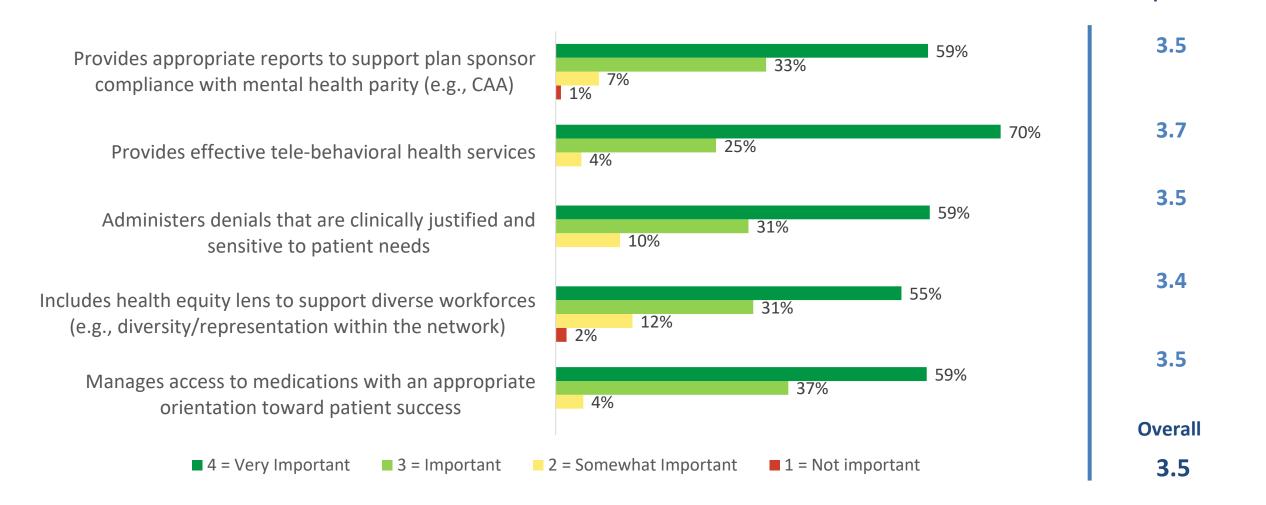
Variation in Satisfaction by Health Plan / Vendor



^{*}Results only included with 5 or more responses*

Other Access

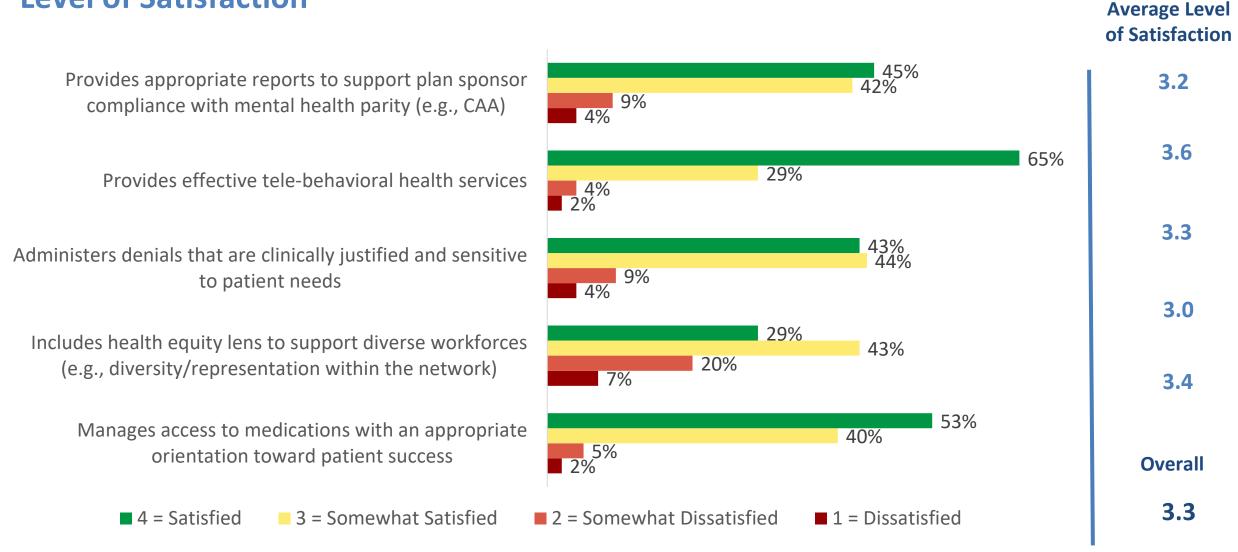
Level of Importance



Average Level of Importance

Other Access

Level of Satisfaction



Other Access

Variation in Satisfaction by Health Plan / Vendor

	Importance	All Health Plans/ Vendors	3.8-4.0	3.4-3.7	3.1-3.3	2.8-3.0	2.5-2.7	2.2-2.4	1.9-2.1	1.8 -1.0
Provides appropriate reports to support plan sponsor compliance with mental health parity (e.g., CAA)	3.5	3.2		<u> </u>	*	—				
Provides effective tele-behavioral health services	3.7	3.6	—	*	\dashv					
Administers denials that are clinically justified and sensitive to patient needs	3.5	3.3		<u> </u>	*	—				
Includes health equity lens to support diverse workforces (e.g., diversity/representation within the network)	3.4	3.0		H		*	—			
Manages access to medications with an appropriate orientation toward patient success	3.5	3.4	—	*		—				

^{*}Results only included with 5 or more responses*

Quality of Care Management

Level of Importance

Promotes and rewards use of standardized measurement for behavioral health specialists

Ensures that all members are systematically screened for depression, anxiety, and substance use disorder

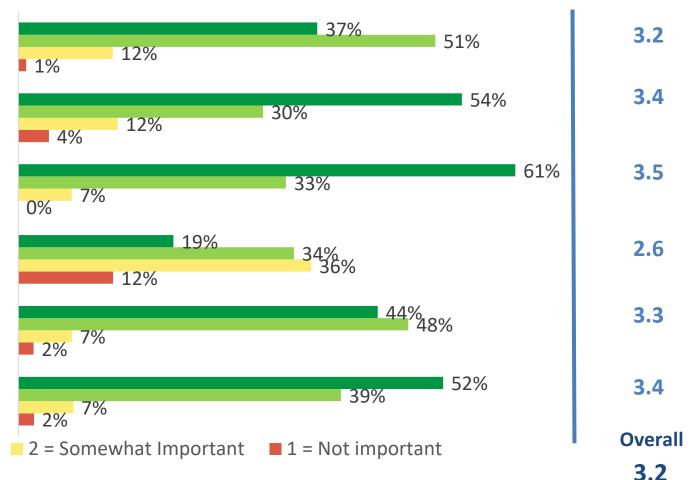
Monitors appropriate prescribing of behavioral health medications relative to patient outcomes

Provides incentive payments to mental health and substance use providers who meet access and clinical quality metrics

Evaluates and reports on engagement with and outcomes of behavioral healthcare services

Evaluates and tailors behavioral healthcare services to diverse communities (LBGTQ+, people of color)

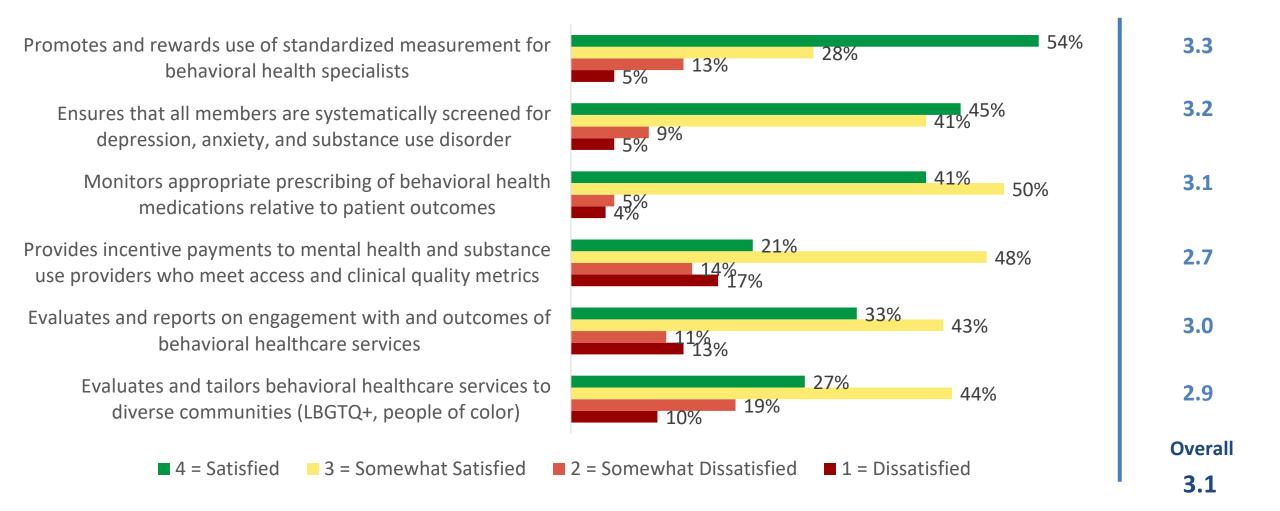
■ 4 = Very Important ■ 3 = Important



Average Level of Importance

Quality of Care Management

Level of Satisfaction



Average Level of Satisfaction

Quality of Care Management

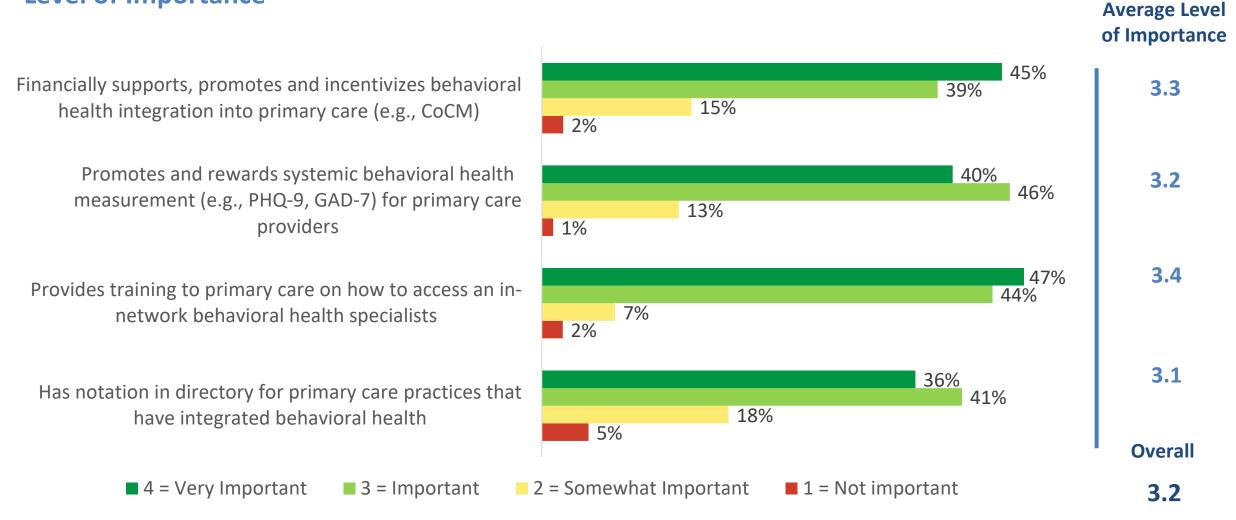
Variance in Satisfaction by Health Plan / Vendor

	Importance	All Health Plans/ Vendors	3.8-4.0	3.4-3.7	3.1-3.3	2.8-3.0	2.5-2.7	2.2-2.4	1.9-2.1	1.8 -1.0
Promotes and rewards use of standardized measurement for behavioral health specialists	3.2	3.3	<u> </u>		*	—				
Ensures that all members are systematically screened for depression, anxiety, and substance use disorder	3.4	3.2		\vdash	*		\dashv			
Monitors appropriate prescribing of behavioral health medications relative to patient outcomes	3.5	3.3		-	*	\dashv				
Provides incentive payments to mental health and substance use providers who meet access and clinical quality metrics	2.6	2.7			\vdash	*				\dashv
Evaluates and reports on engagement with and outcomes of behavioral healthcare services	3.3	3.0		—		*	—			
Evaluates and tailors behavioral healthcare services to diverse communities (LBGTQ+, people of color)	3.4	2.9		H		*				

^{*}Results only included with 5 or more responses*

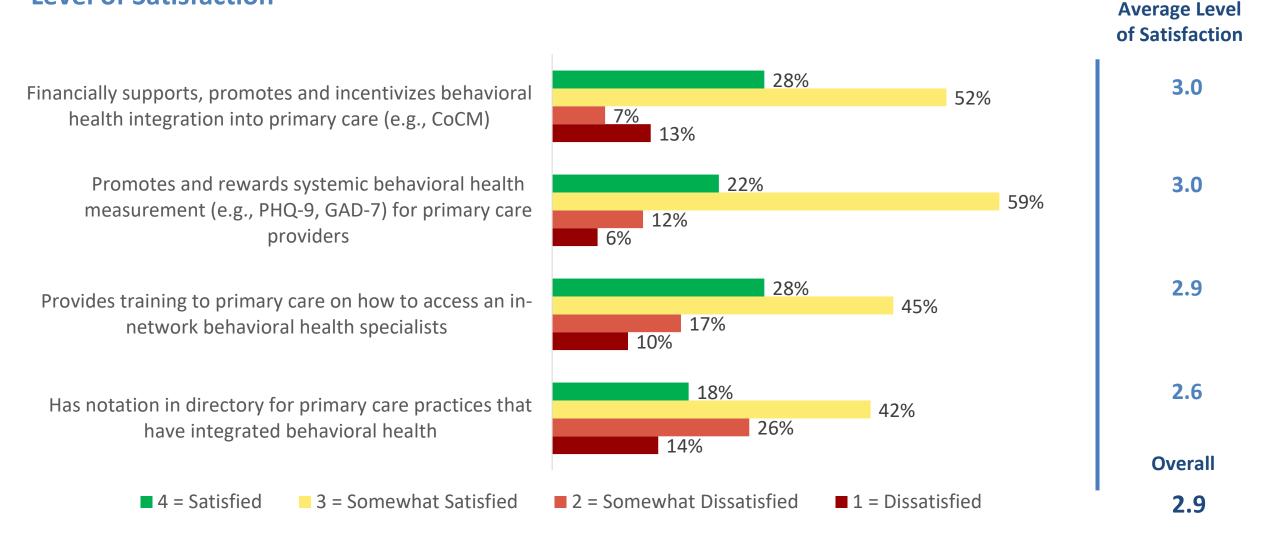
Integrating Behavioral Health Into Primary Care

Level of Importance



Integrating Behavioral Health Into Primary Care

Level of Satisfaction



Integrating Behavioral Health Into Primary Care

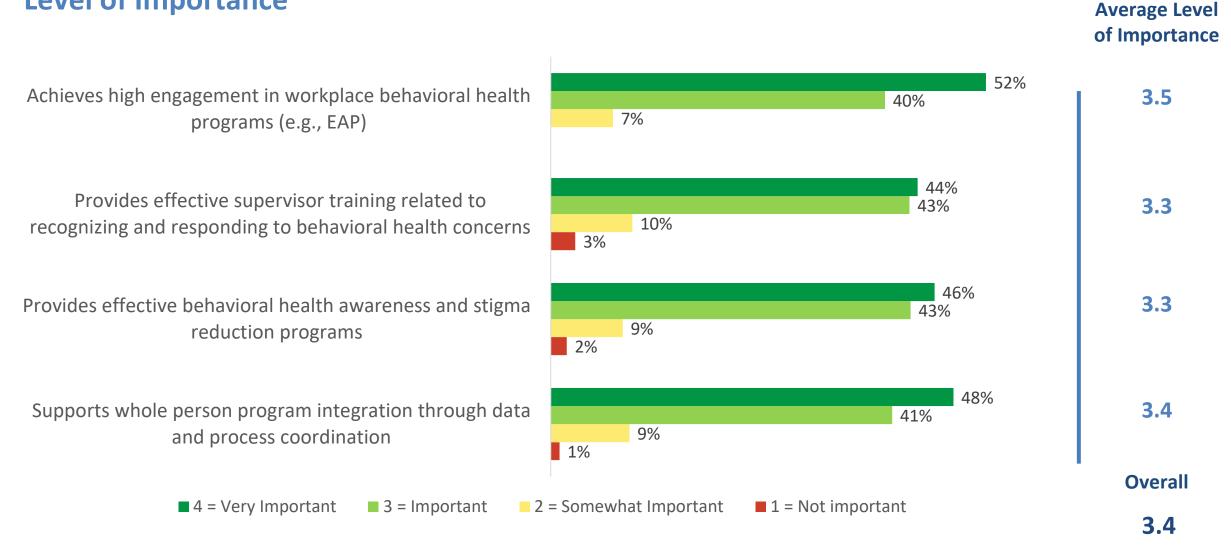
Variance in Satisfaction by Health Plan/Vendor

	Importance	All Health Plans/ Vendors	3.8-4.0	3.4-3.7	3.1-3.3	2.8-3.0	2.5-2.7	2.2-2.4	1.9-2.1	1.8 -1.0
Financially supports, promotes and incentivizes behavioral health integration into primary care (e.g., CoCM)		3.0		<u> </u>		*		—		
Promotes and rewards systemic behavioral health measurement (e.g., PHQ-9, GAD-7) for primary care providers	3.2	3.0			—	*	-			
Provides training to primary care on how to access an in-network behavioral health specialists	3.4	2.9	—			*			—	
Has notation in directory for primary care practices that have integrated behavioral health	3.1	2.6			—		*		—	

^{*}Results only included with 5 or more responses*

Workplace Mental Health

Level of Importance



Workplace Mental Health

Level of Satisfaction

2.9 39% Achieves high engagement in workplace behavioral health 28% 23% programs (e.g., EAP) 9% 31% 2.9 Provides effective supervisor training related to recognizing 29% 26% and responding to behavioral health concerns 14% 3.1 40% Provides effective behavioral health awareness and stigma 39% 10% reduction programs 11% 2.8 14% Supports whole person program integration through data 59% 15% and process coordination 12% **Overall:** ■ 4 = Satisfied 3 = Somewhat Satisfied 2 = Somewhat Dissatisfied ■ 1 = Dissatisfied 2.9

Average Level of Satisfaction

Workplace Mental Health

Variation in Satisfaction by Health Plan / Vendor



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