



**National Association of State Mental Health  
Program Directors (NASMHPD)**

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# Who Are our Consumers

- ▶ Kids to Older Adults.
- ▶ Die 25 years early.
- ▶ Trauma.
- ▶ Co-occurring – At least 6.8 M annually.
- ▶ Stigma – current and past.
- ▶ Multiple System users.

# Where Are They Served

- ▶ CMHCs
- ▶ State Hospitals
- ▶ Substance Abuse settings
- ▶ Emergency Rooms
- ▶ All other forms of med/surg settings – from cancer and diabetes clinics to knee surgeons
- ▶ Prisons
- ▶ Schools???

# What other data systems and burdens

- ▶ CMS – Medicaid and Medicare
- ▶ Private Insurance – including Exchanges
- ▶ Joint Commission and other licensing requirements
- ▶ Block Grant – Substance Abuse and Mental Health
- ▶ Why are these important? States and providers, in this era of deep budget cuts, can only do so much at once. New data systems and requirements must be able to work well with others without adding new levels of problems and bureaucracy.

# Connecting the Dots

- ▶ A new system that is incapable of working well with both state hospitals and emergency rooms would likely be ineffective. Being able to work with prisons would be an added bonus. Must also be able to work with substance abuse providers. Why? Otherwise MH consumers will continue to die 25 years early.
- ▶ A new system also needs to be on the same IT platform, or close to it, to CMS and the Exchanges otherwise ACA and other health integration efforts will not be met, or cause the new IT certification effort to be ignored.
- ▶ Serious hurdles – privacy “barriers”, be it HIPAA or 42 CFR Part 2, as well as other state, federal and even local laws could be insurmountable obstacles. Or at least barriers requiring state and federal legislative changes.
- ▶ This certification project needs to be scalable so that long term functionality can ultimately link to other settings.

# Next Steps

- ▶ The current proposal is a great first step, but it needs to be developed in a fashion that contemplates future (not necessarily right now) interoperability with other systems
  - Providers to Exchanges to State Hospitals
  - Kids to Older Adults
  - Within context of current systemic demands
- ▶ Pilot projects needed in a variety of legally and technically diverse settings.