Mental health in the workforce

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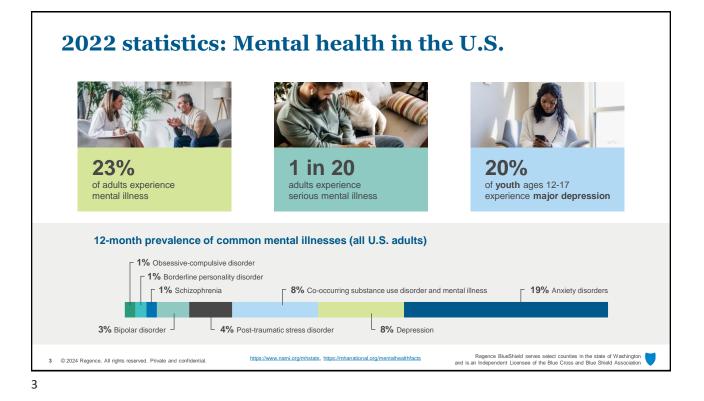
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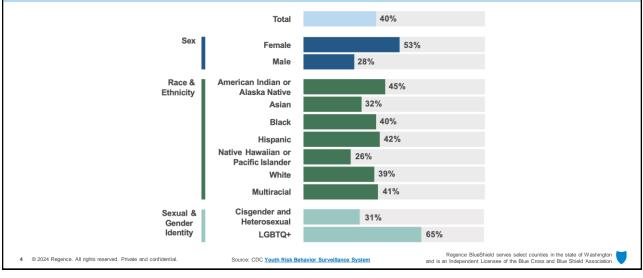
Agenda

- State of mental health in the U.S.
- Risks of stress and burnout
- Resiliency to combat burnout
- · Behavioral health in the workforce
- Interdependence of behavioral health and physical health
- · Behavioral health impact on total cost of care
- A strategic approach to behavioral health
- Resources available for Regence members



No, workers are not alright. But neither are their kids.

CDC 2023 Survey: Experienced persistent feelings of sadness or hopelessness during the past year







Syndrome resulting from chronic workplace stress: Exhaustion, mental distance, negativism, reduced professional accomplishment



- · Feelings of energy depletion or exhaustion
- Increased mental distance, negativism or cynicism related to one's job
- · Reduced professional efficacy

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A chronic condition from prolonged stress

Causes of burnout

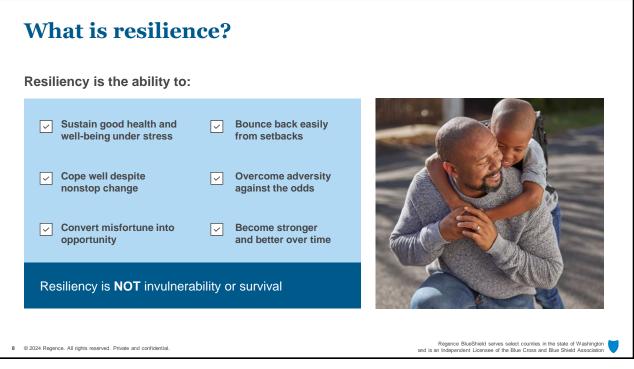
- Work-life imbalance
- Dysfunctional work dynamics
- Unclear job expectations
- · A sense of lack of control
- · Limited support

Prevent & manage burnout

- Create a workplace culture that promotes wellness
- · Recognize the impact of chronic stress
- Destigmatize conversations on mental health
 and well-being
- · Watch for signs and symptoms of burnout
- · Provide support when needed

Left untreated, burnout can lead to the development of serious health conditions:					
Depression	Substance abuse	Insomnia	High blood pressure		
Anxiety	Weight gain/loss	Heart disease	Type 2 diabetes		
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How can employers help create a mentally healthy workplace

- · Have 5-minute mental health checks before meetings
- · Build social connections at work
- · Managers lead by example
- · Develop an organizational culture that promotes well-being
- Combat stigma by encouraging open discussion in the workplace and create a safer workplace
- Be flexible and understanding of the needs of employees, including personal circumstances
- · Educate workforce on tools and resources available to them:
 - Encourage EAP (ComPsych®) utilization
 - · Facilitate access to health care
 - <u>Center for Workplace Mental Health</u>

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ComPsych® is a separate company that provides EAP services.

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Depression is more than just a sad mood

Coworkers-even supervisors-may be:



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It's not "just anxiety"

Anxiety can be debilitating

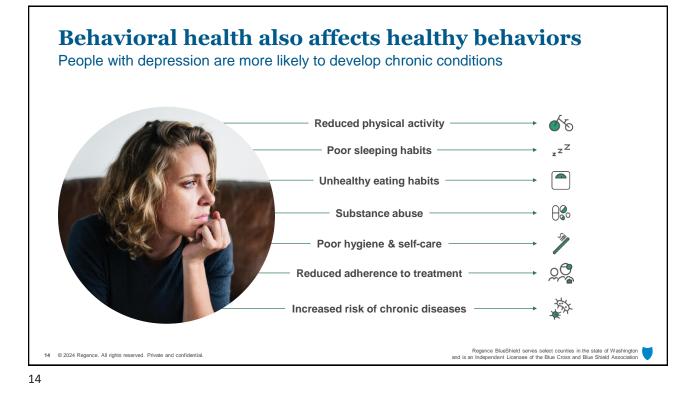
Generalized anxiety disorder (GAD): Feeling excessive anxiety or worry on most days for at least six straight months	Social anxiety disorder	
Panic disorder	Obsessive-compulsive disorder (OCD)	
Post-traumatic stress disorder (PTSD)	Phobia disorders	
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Presenteeism

At work, but out of it









Chronic illnesses & mental health are interdependent

These chronic illnesses increase the likelihood of depression, so proactive outreach can make a difference:

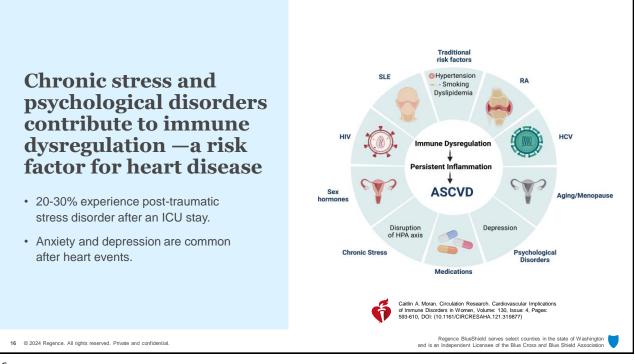
- Diabetes
- · Alzheimer's disease
- Cancer
- Autoimmune diseases
- Coronary heart disease
- Epilepsy

- · Obesity
- HIV/AIDS
- · Multiple sclerosis
- · Parkinson's disease

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- Hypothyroidism
- Stroke

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Increased costs of chronic medical conditions with concurrent mental illness/substance use

Key member findings (over last 12 months)

- Total cost of care: While 22% of members have a diagnosed BH condition, they account for 41% of total annual spend
- BH services only: Capture 5% of total medical spend
- Anxiety and depression: 68% of BH members with condition; account for 25% of total annual spend
- Substance use and eating disorders: Members with condition account for 9% of total annual spend and highest PMPY costs (SUD \$21K, ED \$25K)
- Prevalence:¹ BH individuals have 2 to 6 times higher frequency of co-occurring chronic physical conditions
- Potential savings:² Estimated 9% to 17% potential reduction of excess costs incurred for comorbid physical and behavioral health conditions through effective integration of BH-medical care

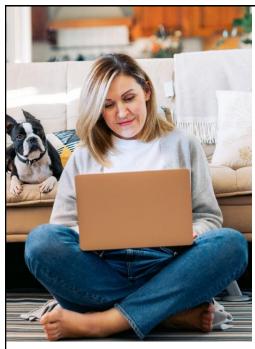
Sample impact of BH comorbidities on chronic condition costs

Hypertension (15% of members)	Without BH comorbidity	With depression comorbidity	With substance use comorbidity	Diabetes (6% of members)	Without BH comorbidity	With depression comorbidity	With substance use comorbidity
Average cost per member	\$14K	\$21K	\$30K	Average cost per member	\$16K	\$25K	\$39K
% change	_	51%	113%	% change	_	54%	138%
Member count	220-240K	34K	12K	Member count	84-95K	14K	ЗK
Sources: BH dashboard using IPRO data on claims for members between 11/2021 - 10/2022 D 2024 Regence. All rights reserved. Private and confidential.							

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Our strategic approach to behavioral health

Objective is to ensure members can access timely and effective behavioral health solutions	1 Acc	cess	Network of providers and vendor solutions is sufficient to meet full range of member needs in acceptable time frames	Primary focus in 2022
	2 Connection		Members find the care they need and schedule timely appointments for services	Primary focus in 2023
	3 Qu	ality	Members receive the right level of care, effective care, and coordinated care to achieve health outcomes	Primary focus in 2024
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The need for behavioral health care continues to rise

The good news: People can get better. Behavioral health conditions are treatable

- Most insurance carries provide access to a broad range of traditional and virtual mental health and substance use disorder providers nationwide.
- Virtual care providers offer near immediate access and specialized treatments, including those for substance use disorders, eating disorders, OCD, child and adolescent therapy, and more.
- Members can access virtual providers directly online without a provider referral or coordination with their health plan.
- Sometimes, a traditional, brick-and-mortar provider is preferable to a virtual provider solution.

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Behavioral health resources

Continuum of care

Care management

- Case management
- Care advocates
- Integrated behavioral and medical case management
- · Integration with primary care

Services offered

Facility-based care

- Inpatient
- Residential
- · Partial hospitalization
- Intensive outpatient
- · Virtual IOP, PHP

Outpatient care

- · Office-based
- Virtual
- In-home
- · Hybrid of above

Digital & product

Virtual services

- App-based services/ self-guided tools
- · Virtual specialty clinics
- · Employee assistance programs
- Intensive levels of care delivered in the home



Advantages of virtual care

Quality & outcomes of online or mobile options are as good as or better than traditional in-office care

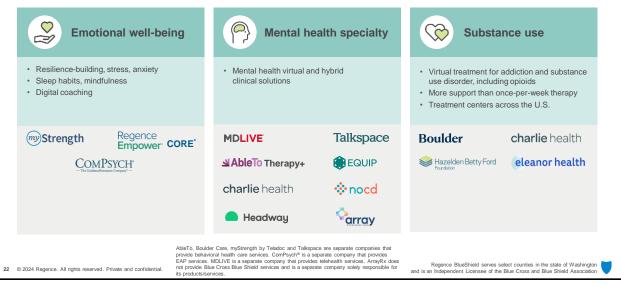
- Rapid connection to care
- · Convenient access anytime, anywhere
- · Video or messaging options
- · Anonymous and discreet
- More affordable

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Broad range of mental health support for every need

Effective behavioral health solutions





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988 Suicide & Crisis Lifeline

(formerly known as the National Suicide Prevention Lifeline)

- Provides free and confidential emotional support to people in suicidal crisis or emotional distress 24/7 and across the United States.
- Composed of a national network of 200+ local crisis centers, combining custom local care and resources with national standards and best practices.
- The 988 Lifeline offers Spanish call, text and chat services, along with interpretation services for 240+ languages and dialects
- Send any message to **988** to start a text conversation with the 988 Lifeline or text AYUDA for chat in Spanish
- 988 Lifeline posters, wallet cards and other print materials can be ordered through the SAMHSA website at <u>store.samhsa.gov</u>, along with PDF versions
- · Anyone can add a 988 link to their website: 988lifeline.org

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Thank you! Regence ぼ

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