

THE LAGGING STATE OF MENTAL-HEALTH CARE

BY JAMIE SIEBRASE

Colorado's lofty ranking for health doesn't extend to behavioral wellness, but some initiatives offer hope for improvement



for her to get the help she needed, she'd have to commit a felony and be placed in a hospital for the criminally insane," Paul says.

That's exactly what happened four months ago, when his daughter shot at a man during a psychotic episode. She's currently being detained while awaiting sentencing.

Getting mental health care shouldn't be this difficult.

One in five

Annette and Paul's daughter ran a thriving business and owned real estate in their hometown of Pueblo. Then she turned 33, and things changed dramatically.

"She talked about being a spirit medium," Annette says. Paranoia began. Mysterious entities stole clothes, moved belongings and spoke to Annette's daughter through earbuds.

"We knew something was wrong, but we felt like deer in the headlights," Paul says. He couldn't reason with his daughter, and since she was an adult, he couldn't force her to get help.

The couple, who asked that their middle names be used to protect their family's privacy, called the police after they got a concerning call about their daughter one night. The local sheriff placed her on a 72-hour hold at a local hospital. A month later, she was involuntarily admitted to the Colorado Mental Health Institute Pueblo (CMHIP), a 449-bed psychiatric hospital providing inpatient behavioral health services.

CMHIP and Colorado Mental Health Institute Fort Logan are Colorado's only two state-run psychiatric hospitals.

At CMHIP, the couple's daughter was

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diagnosed with bipolar disorder. She was given medication, and her symptoms began to improve.

"This is where you'd think the story gets better, but unfortunately, it gets worse," Paul says. His daughter was released from CMHIP with a prescription she never filled.

For the next few years, she bounced in and out of CMHIP, which is also a forensic hospital providing long-term services for individuals with pending criminal charges and those found not guilty by reason of insanity.

"We were told by professionals that

Americans — more than 40 million people — has a mental health condition. The most common mental illnesses are depression and anxiety, but one in 17 Americans will suffer from a more serious disease: schizophrenia, bipolar disorder or extreme paranoia.

Physically speaking, Colorado consistently ranks among the nation's healthiest states, with 86.6 percent of Coloradans reporting excellent, very good or good health according to findings from the 2017 Colorado Health Access Survey, released in September by the National Association of State Mental

Health Program Directors.

Findings on mental health, though, were more concerning, with 11.8 percent of Coloradans reporting poor mental health, up from 9.9 percent in 2015. About one in 13 respondents polled didn't get the mental health services they needed; those figures were even higher among

violence.

"About half a million people in Colorado are not getting the mental health care they need," Romanoff says. "In Colorado, and across the nation, we don't do enough around early intervention."

He says that three-quarters of people with mental illness have experienced

biggest barrier is cost," Romanoff says.

Forty-three percent of Coloradans polled didn't think their insurance would cover the care they needed. They aren't entirely wrong.

Under the Mental Health Parity and Addiction Equity Act of 2008, which was amended by the Affordable Care Act to include individual health insurance coverage, many insurance plans require equal benefits for mental and physical health care.

Even so, Romanoff says, "Mental health professionals in Colorado are reimbursed 40 percent less than other providers. The trouble is that these laws often go unenforced."

Insurance doesn't do much good if you can't find a provider — and that's another issue.

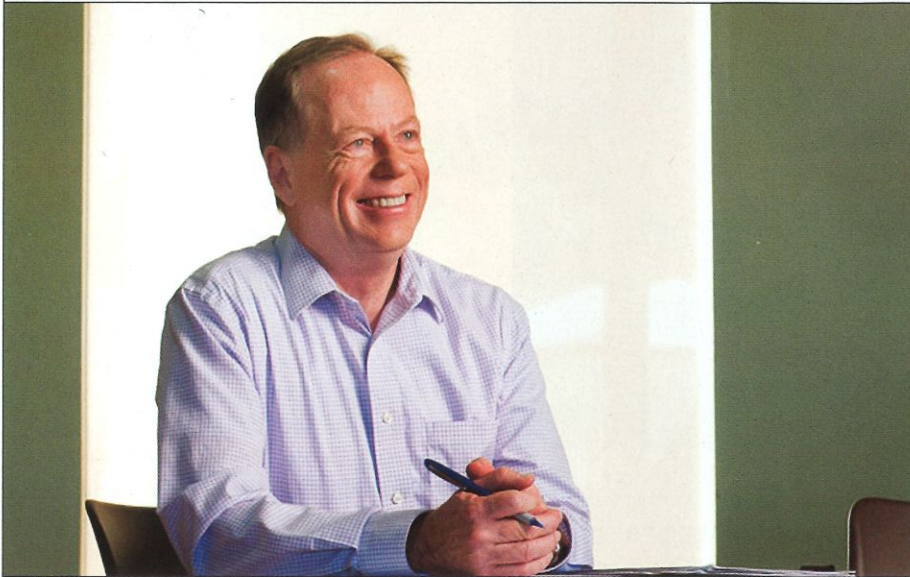
Thirty-five percent of Coloradans had trouble booking mental health appointments last year. The number of behavioral health providers has dropped 14 percent nationwide since 2008, Clark says, making it impossible to adhere to state insurance rules, which specify that individuals should be able to see a provider within seven calendar days for non-urgent care and within 24 hours for emergencies.

The wait to see a psychiatrist in Denver is five months long, by some accounts. Statewide, there are 92 primary care physicians per 100,000 people, compared with only 15 psychiatrists.

"For people with private insurance who have behavioral health coverage, only two out of every five who need treatment actually receive it," Clark says. "People will look at their provider list, start calling providers, and oftentimes they'll get an answering machine that says the provider is not currently taking new patients." Frustrated, many patients give up.

Those who can't access early intervention might wind up in a hospital emergency room or psychiatric ward, like Paul and Annette's daughter.

Hospitals aren't designed for long-term care, though, and Colorado only has half the number of psychiatric beds needed. "Using our criminal justice system as a warehouse for people with mental illness is probably the most expensive decision we can make — and the least therapeutic," Romanoff says. **CB**



Medicaid patients.

In Colorado, funding for mental health services comes from a combination of state and federal funds, including Medicaid. The state budget to care for patients without insurance was \$40.7 million in 2017. That's just a drop in the bucket. In 2010, behavioral health cost Colorado at least \$887 million, according to a report issued by the Colorado Health Foundation.

It costs money to treat mental illness, "But there's a greater cost to not treating it," says Andrew Romanoff, president and CEO of Mental Health Colorado, former four-term state representative and two-term speaker of the house.

The state prison system and county jails spent \$93 million tax dollars on mental health services in 2010, and hospitals spent another \$182 million.

Employers pay, too, when their employees aren't getting the mental health care they need. The National Institute of Mental Health reports that mental illness costs the U.S. at least \$193 billion annually in lost earnings alone. Unmanaged mental health issues also cause on-the-clock risks, including increased accidents and workplace

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symptoms of their illness by the time they're 24. "Treatment arrives, on average, eight to 10 years later," according to Romanoff.

The benefits of early intervention are documented. "When people come in for treatment, 80 percent will get better — and those who don't 'get better' usually still benefit from the treatment," says Dr. Carl Clark, president and CEO of the Mental Health Center of Denver.

If it's that simple, why aren't Coloradans getting the care they need?

Stigma is one obstacle. Thirty-eight percent of Coloradans polled for the Colorado Health Access Survey admitted that they were uncomfortable talking about their problems, or concerned somebody would find out. "But the single