



CATALIGHT™

Top Trends in Behavioral Health for Payers

7 insights that are shaping access, quality and value.

A CATALIGHT WHITE PAPER



Staying ahead of pace

For payers, behavioral health—and especially intellectual and developmental disabilities (IDDs), including autism—is a complex and costly category of care. In between delivering exceptional member experiences and staying in compliance with evolving laws and regulations, it can be difficult to keep up with the rapid pace of change in behavioral health care delivery.

Providing predictable access to timely care is challenging in a constantly evolving landscape. Yet, it is critical, as focusing on behavioral health is more important than ever.

This white paper presents current insights that are shaping opportunities available to payers—where expanding capacity to care can improve wellbeing and outcomes for all.



TABLE OF CONTENTS

Top Trends in Behavioral Health for Payers

1	The evolving landscape of value-based care in behavioral health	4
2	Responding to legislation affecting behavioral health care	6
3	Addressing shortcomings in care through innovation.....	8
4	Expanding the scale of service through outsourcing	9
5	Continuing growth of telehealth in behavioral health services.....	12
6	Improving operational efficiency for care delivery.....	13
7	Consolidation helps create more access.....	14
8	Bringing it all together with a partner built to scale	15

TOP TREND #1

The evolving landscape of value-based care in behavioral health

Behavioral health has been slow to move toward value-based compensation—but the landscape is now evolving faster than ever.

Trends towards value-based care (VBC) models in behavioral health are emerging with greater coordination between payers and providers to standardize measurable and meaningful outcomes. Several states and organizations are testing VBC payment models that could be applied to behavioral health, including capitation, pay-for-performance and shared risk models.¹

The integration of behavioral health services into holistic care represents a great opportunity to change how care will be delivered in the future.²

However, there are still obstacles to rapid, widespread adoption. The lack of an industry standard on what specific metrics translate to value and how to attribute costs present one major challenge. Without historical data comparable to other conditions, payers struggle to precisely identify the true costs of behavioral health care and have difficulty proposing sustainable solutions. In addition, providers may struggle operationally when moving to a value-based model, as they may need to invest in systems to better capture data for establishing baselines and measuring outcomes.

Source:

¹ BHCOE. [Value-based payment models in ABA: Preparing for value-based payment models in applied behavioral analysis](#). BHCOE.org.

² Cameron MJ, et al. [Toward a Value-Based Care Model for Children with Autism Spectrum Disorder](#). OA J Behavioural Sci Psych 2022, 5(1): 180065.



Challenges to adoption

Factors historically impacting behavioral health's evolution to VBC



Fragmentation of the healthcare system



Health insurance carve outs



Weak enforcement of mental health parity laws



Lack of data and standards around outcomes



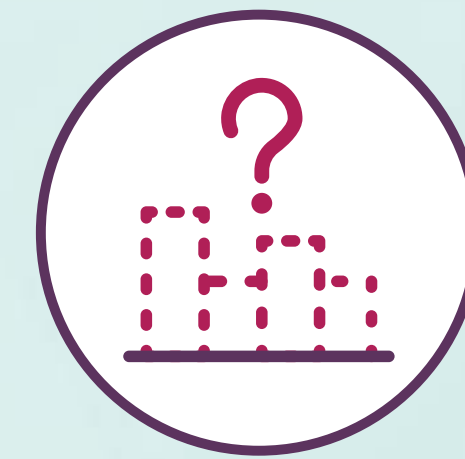
Low reimbursement rates



Lack of widespread adoption of systems to capture standardized digital records



Barriers to consumer access of behavioral health services



Lack of historical data showing how behavioral health outcomes reduce overall health costs

Source: Foosness, Susan. ["Opening the door: Are behavioral health providers ready for value-based care?"](#) MedCity News, July 25, 2022.

TOP TREND #2

Responding to legislation affecting behavioral health care

The Mental Health Parity Act (MHPA) along with the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act (MHPAEA) have long established the legislative basis for behavioral health parity in healthcare. The enforcement of these laws, however, has traditionally been inconsistent.

But more recently, enforcement by federal and state government entities has increased following the 2021 Consolidated Appropriations Act, which required group health plans to provide analysis of non-quantitative treatment limitations (NQTL) to ensure parity with medical and surgical benefits.³

Provider response to increased enforcement

The shift towards enforcing existing parity laws makes it clear that comprehensive compliance and quality programs are a high priority to ensure payers and providers align to legislation and regulation. These changes will necessitate that providers and their administrators improve the quality of care that they deliver while focusing on documenting and reporting.

The ability to meet parity regulations and better coordinate delivery of care within integrated healthcare organizations represents a mission-critical challenge with large financial and legal repercussions for payers.

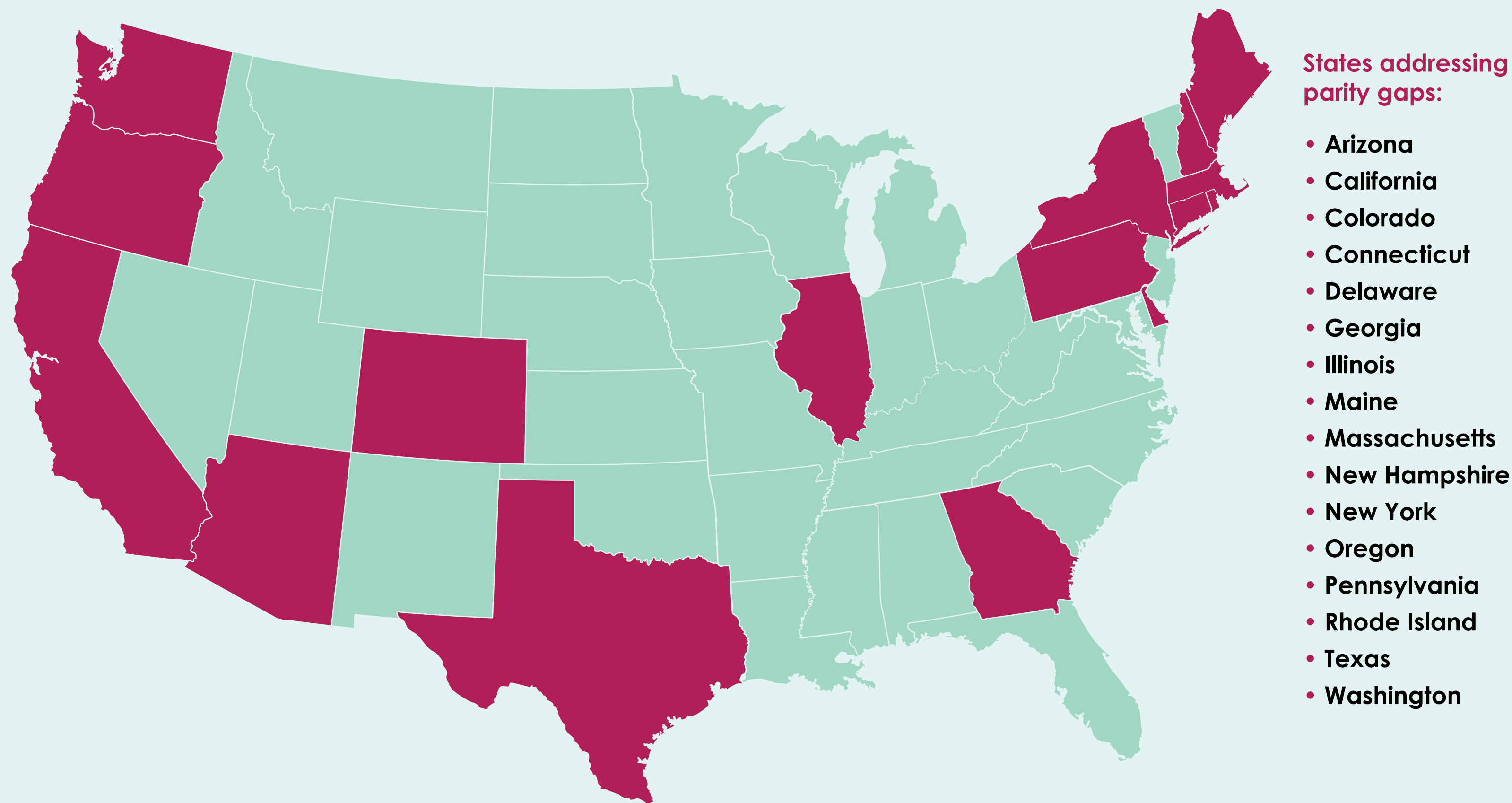
Source:

³ParityTrack. "[State Parity Regulatory Enforcement Actions.](#)" (n.d.). Retrieved October 21, 2022.



Action at the state level

Recent state legislation changes and enforcement efforts point to an increased focus on mental health parity. A 2022 study by The Council of State Governments found at least 16 states have passed recent legislation or acted on enforcement and compliance efforts.



Source: Kirby, Jessica, and Slone, Sean. ["Mental Health Insurance Parity: State Legislative and Enforcement Activities."](#) CSG, April 28, 2022.

TOP TREND #3

Addressing shortcomings in care through innovation

In a 2022 Gallup and West Health poll, 75% of Americans graded healthcare affordability a 'D' or 'F'.⁴ With problems exacerbated during the COVID pandemic, access limitations became evident as millions of people were affected by constrained services. This became especially acute in behavioral health care, as the field was already historically challenged by a shortage of licensed clinicians and registered practitioners, a lack of effective case management, under- or over-diagnosing vulnerable populations, and limitations to healthcare data management.

The need for transformation in behavioral health represents an opportunity for innovation that could dramatically impact the access to person-centered care focused on meaningful outcomes. For example, Catalight offers advanced modalities of care like Parent-Led ABA—a parent-mediated approach where parents provide direct treatment with the support of a Board Certified Behavior Analyst® (BCBA®) or a Board Certified Assistant Behavior Analyst® (BCaBA®). Organizations that can develop new treatments to meet access issues while consistently delivering high-quality, affordable care will be primed to thrive in this new era.

Source:

⁴ Burky, Annie. "Poll by Gallup and West Health shows 75% of Americans grade the affordability of US healthcare as a D or F." Oct 6, 2022.



TOP TREND #4

Expanding the scale of service through outsourcing

The need for behavioral health services has been growing rapidly, especially considering the surging demand for services during the COVID epidemic. A recent survey by AHIP shows that over the last three years, 89% of commercial health plans are actively growing their behavioral health networks.⁵

Challenges to improving scale

Still, creating access to behavioral health services faces hurdles. One of the most daunting is finding qualified providers to expand existing networks. In the autism field, there is a shortage of trained clinicians making it difficult to meet the increasing demand as diagnosed cases of autism rise year-over-year. In addition, high turnover rates can lead to inconsistency in services and severely disrupt an organization's ability to expand care.⁶

Benefits of outsourcing

Considering the difficulty involved in building out behavioral health services to meet unprecedented demand, many healthcare organizations have looked to partner with other organizations that specialize in providing behavioral health services. These network builders manage key issues—providers, access, timeliness, quality and data—and share expensive administrative costs with the payer.

Source:

⁵ AHIP. "New Survey Shows Strong Action by Health Insurance Providers to Growing Mental Health Care Demands." Aug. 4, 2022.

⁶ Molko, Ronit. "[Improving Retention in ABA Services.](#)" Forbes, November 7, 2018.



Meeting demand for care

Payers are working to scale up service to improve access to mental health care by bringing providers into their networks and helping patients find available behavioral health appointments.



100%

provide coverage for tele-behavioral health services



48%

growth of in-network behavioral health providers over 3 years



89%

are actively recruiting mental health care providers



83%

are recruiting providers who reflect the diversity of the people they serve



78%

have increased provider payments to recruit more high-quality professionals



83%

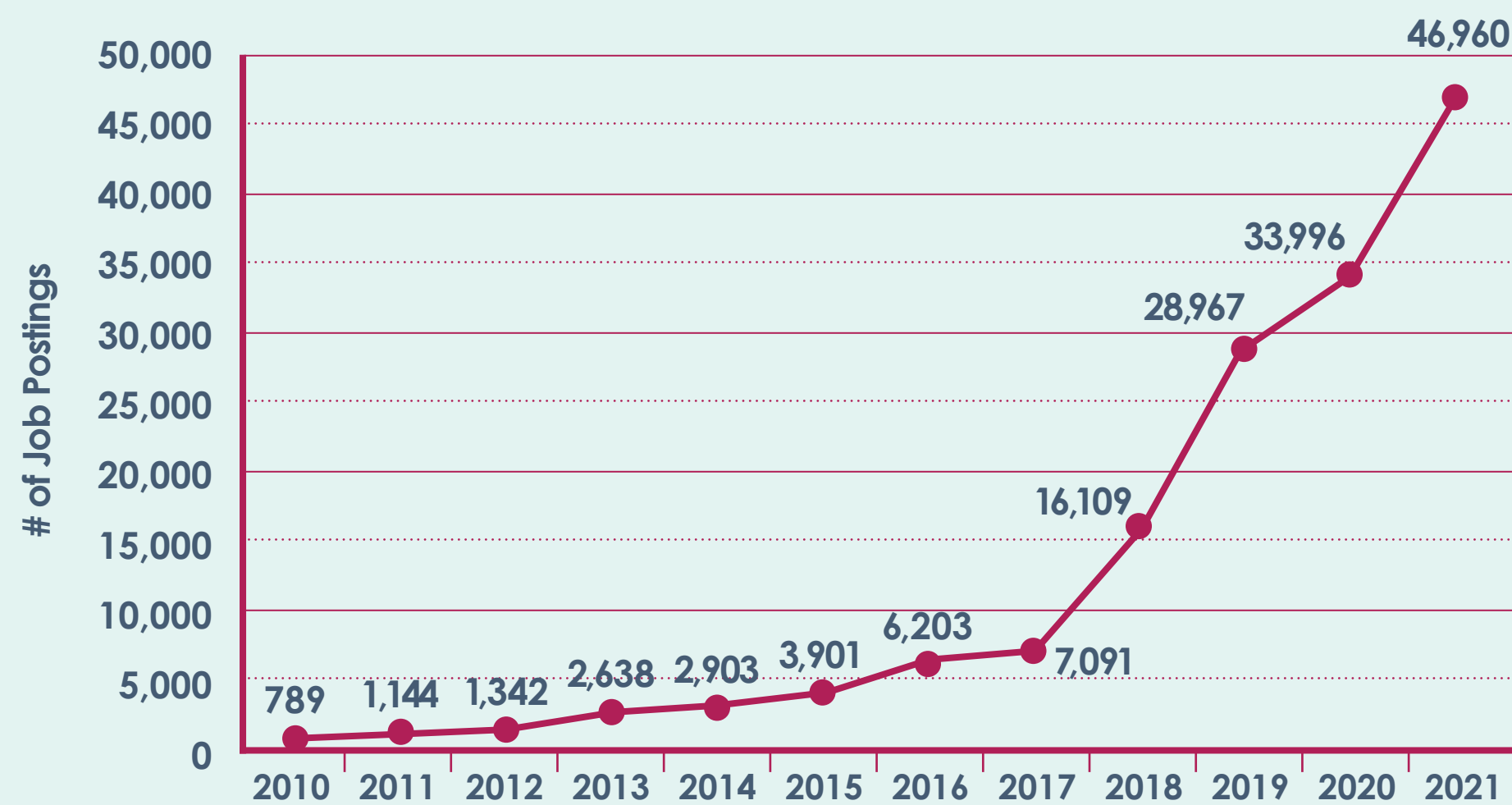
assist enrollees with finding available mental and behavioral health appointments

Source: AHIP. "New Survey Shows Strong Action by Health Insurance Providers to Growing Mental Health Care Demands." Aug. 4, 2022.

Surging demand for behavior analysts

With the need for Board Certified Behavior Analysts (BCBAs) soaring, some healthcare organizations are looking to partnerships with behavioral health networks to meet the need for providers.

Annual Demand for BCBA Certification



The annual number of job postings nationwide over the past 12 years (2010-2021) that either required or preferred BCBA/BCBA-D certification.

Note: There are currently 33 states that license behavior analysts and 1,092 postings in 2021 that required or preferred a license to practice behavior analysis.



Surging Demand for BCBA Certification

+5,852%

Increase of job openings for behavior analysts over the past 12 years

Source: Behavioral Analyst Certification Board. "U.S. Employment Demand for Behavioral Analysts: 2010-2021." February 2022.



TOP TREND #5

Continuing growth of telehealth in behavioral health services

The use of telehealth increased dramatically during the COVID pandemic era as surveys have shown that up to 41% of all commercial and Medicare telehealth claims in June of 2022 were for behavioral health.^{7, 8} As the adoption of remote care increases, behavioral health is positioned to offer wider access to care for a broader segment of the population. Integration of remote services also addresses limitation in trained clinical providers allowing providers to see more clients with less travel time while working with clients in their own environments.

How telehealth affects those with behavior health needs

Specifically in the care and treatment of autism, telehealth offers many advantages. Increased communication allows clinicians the ability to have more oversight over treatment progress. Plus, although physical engagement may be restricted, the increased opportunities to remotely engage with clients allow specialists to see clients in their own environments and make more frequent modifications to treatment plans and earlier interventions. In addition, with more than 80% of U.S. counties lacking access to ASD diagnostic resources,⁹ combining specialized care with a support team of local providers allows a smaller number of specialists to oversee a larger network of local staff that can engage directly with clients. This implementation of local and remote support allows traditional physical clinics to expand specialized care and cover larger areas.

Source:

⁷ Larson, Chris. ["Telehealth Could Become Second-Class Modality Without Careful Regulatory Action."](#) Behavioral Health Business, September 30, 2022.

⁸ FAIR Health. [Monthly Telehealth Regional Tracker.](#)

⁹ Solomon D, Soares N. ["Telehealth Approaches to Care Coordination in Autism Spectrum Disorder. Interprofessional Care Coordination for Pediatric Autism Spectrum Disorder."](#) 2020 Jun 24:289–306. doi: 10.1007/978-3-030-46295-6_19. PMID: PMC7310994.

TOP TREND #6

Improving operational efficiency for care delivery

The sheer demand for behavioral health care, especially in the field of autism, has skyrocketed during the COVID pandemic. At the same time, the prevalence of children diagnosed with Autism Spectrum Disorder (ASD) continues to increase—in the U.S., autism rates increased from 1 in 150 children in 2000 to 1 in 44 children today. In California, the rate stands at 1 in 26 children and is predicted to continue growing.

Meeting this demand for care requires more efficiency in the clinical oversight that Board Certified Behavior Analysts (BCBAs) provide to technicians who provide direct services. In addition, managing the administration and billing of services requires more efficient systems. The shift in healthcare towards value-based care also requires efficiencies in tracking data and reporting of outcomes for behavioral health clients.

Tapping into efficient networks

Partnerships between large healthcare organizations and well-established behavioral health networks help integrate quality behavioral health care into existing systems. A well-established behavioral health network will have already operationalized efficiencies into clinical oversight, quality and population management. Without having to build new networks and administrative oversight, existing healthcare organizations can utilize the already implemented structure, network and administration that specialized behavioral health companies have established.



TOP TREND #7

Consolidation helps create more access

Consolidation in behavioral healthcare providers has accelerated in recent years as the adoption of technology has increased oversight and reporting of clinical outcomes. The information technology layer of behavioral health allows efficient systems to track the volume of services provided, report the administrative and compliance actions performed, and track measurable clinical outcome targets. With this management and oversight layer established, the number of providers can be increased to scale operations and increase the efficiency of returns.

Consolidation represents movement in the behavioral health field towards greater efficiency and oversight. As these systems grow, the economies of scale favor larger organizations that can continually optimize the infrastructure of reporting and administration. Partnerships with established third-party behavioral health companies allow organizations to gain similar efficiencies through integration of services synergistically within their broader services.



Bringing it all together with a partner built to scale

With a robust network of more than 10,000 practitioners who deliver nearly 3 million hours of care each year, Catalight Care Services provides a scalable solution to meet the evolving needs of payers and their members.

Value

Our multidisciplinary team provides person-centered care that drives meaningful outcomes. By offering multiple modalities of care with the flexibility to effectively serve clients and families, we create **predictable access** to **quality care** with **operational efficiencies** that help keep care affordable.

Even as behavioral health care utilization continues to increase—one recent study found that behavioral health visit volumes for commercial plans increased by more than 24% from January 2019 to March 2022 alone¹⁰—an innovative approach to care modalities can meet demand while managing costs.

Access

As legislation around access to care continues to evolve, Catalight provides a demonstrated solution for proactively managing a large network of providers to **mitigate payer financial and reputational risk**. In partnership with Catalight, payers can better forecast legislative impacts, navigate complex legal environments, and respond quickly and successfully.

We also provide solutions to access at the community level. With the ability to oversee **both telehealth and center-based providers**, Catalight fits the model of care to family constraints, such as telehealth options for communities that lack access to local practitioners.

Quality

Catalight providers are highly trained to support treatment plans for children and families, all while helping them achieve their unique goals. To ensure providers meet the latest clinical standards, we regularly conduct peer reviews, host provider meetings, and provide comprehensive resources, training and direction. Catalight technology support also provides nearly real-time longitudinal data on quality drivers.

Through our provider dashboards, we get a clear view into the progress and outcomes of our clients, including subpopulations, allowing us to build a level of standards that help providers deliver **high-quality care consistently**.

¹⁰ Trilliant Health. "2022 Trends Shaping the Health Economy." October 2022.



Join us on the journey.

For more information, visit <https://choose.catalight.org>