



HRSA's Behavioral Health Initiatives

2022 National Dialogues on Behavioral Health Conference

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Vision: Healthy Communities, Healthy People



Agenda

- 1 Bureau of Health Workforce (BHW) Behavioral Health Action Plan
- 2 Division of Medicine and Dentistry's Behavioral Health Programs
- 3 Upcoming Programs
- 4 Questions/Discussion

Bureau of Health Workforce Behavioral Health Action Plan



Purpose

- Provides a guide for a federal response to address the behavioral health workforce challenges and needs across the nation.
- BHAP aligns with the HHS Strategic Plan in its effort to support and advance behavioral health. HHS strategies seek to strengthen and expand behavioral health services into the healthcare system.
- HRSA provides investments in behavioral health workforce training and education, supports the integration of behavioral health and primary care, and conducts behavioral health workforce related research to identify trends that inform BHW's behavioral health programming.
- As the HHS Behavioral Health Workforce Coordinating Council evolves its Integration Roadmap, this plan can serve to support HRSA's and BHW's contributions.



Bureau of Health Workforce Behavioral Health Action Plan

Target Areas

1. Expand and/or enhance the behavioral health, primary care, and healthcare systems workforces to provide behavioral health care and services;
2. Integrate behavioral health and primary care;
3. Address resilience, mental health, and well-being of the health care workforce;
4. Align BHW's behavioral health workforce development with key stakeholders;
5. Improve and expand behavioral health workforce data in the United States; and
6. Consider statutory and Centers for Medicare & Medicaid Service (CMS) policy changes to improve behavioral health care.



Bureau of Health Workforce Behavioral Health Action Plan

Recommendations

1. Expand the pipeline of behavioral health professionals and health support workers by increasing the number of new providers, and enhancing the knowledge, skills, and abilities of the current primary care workforce in behavioral health.
2. Foster the integration of behavioral health and primary care to meet community health needs.
3. Enhance resilience, mental health, and well-being of behavioral health, primary care, and healthcare systems workforces.
4. Enhance synergy between BHW programs and efforts of other behavioral health stakeholders.
5. Improve and expand behavioral health workforce data in the United States.
6. Consider Congressional statutory changes and CMS policy/regulatory changes to advance behavioral health workforce development and payment policies.



Promoting Resilience and Mental Health Among Health Professional Workforce

Program Purpose

- Provide support to entities providing health care, health care providers associations, and Federally Qualified Health Centers (FQHCs), taking into consideration the needs of rural and medically underserved communities, to establish, enhance, or expand evidence informed or evidenced-based programs or protocols to promote resilience, mental health, and wellness among their providers, other personnel, and members, collectively known as the “Health Workforce.”

Eligibility

- Eligible applicants are entities providing health care, including health care providers associations and Federally Qualified Health Centers (FQHCs).



Promoting Resilience and Mental Health Among Health Professional Workforce

Program Objectives

Establish, enhance, expand, and integrate resilience, mental health, and wellness evidence-informed or evidence-based programs/protocols within their organization's values, expectations, policies, and procedures to provide their health professional workforce with the knowledge, skills, services, and resources to become resilient and manage workplace stressors.

Implement evidence-informed or evidence-based practices within the organizations' culture to support the rapid deployment of strategies and training that addresses health care professional workforce burnout, resilience, mental health, and wellness to achieve a culture of wellness in organizations and health care systems.

Increase the capacity of organizations to transform their organizational culture, values, and expectations to provide needed community-based and culturally competent services and resources to their health professional workforce(s) to enable them to manage workplace stressors.



Promoting Resilience and Mental Health Among Health Professional Workforce

FY 2021 Appropriation	\$29,500,000
Ceiling Amount	Total - \$2, 950,00 over 3 years Year 1 - up to \$1,425,000 Year 2 - up to \$897,000 Year 3 - up to \$634,000
Number of Awards	10
Project Period	January 1, 2022 to December 31, 2024 (3 years)



Promoting Resilience and Mental Health Among Health Professional Workforce

Program Requirements

1. Establish, enhance, or expand evidence-informed or evidence-based programs or protocols that promote organizational capacity to support resilience, mental health, and wellness for the health professional workforce.
 - Applicants must describe the activities they will use to establish the programs and/or protocols.
2. Integrate resilience, mental health, and wellness evidence-informed or evidence-based programs or protocols within their organization's values, expectations, policies, and procedures to provide their health professional workforce with the knowledge, skills, services, and resources to become resilient and manage workplace stressors.



Promoting Resilience and Mental Health Among Health Professional Workforce

Program Requirements

3. Develop partnerships with organizations that have established and successful programs to provide resilience, mental health, and wellness training for their health professional workforce(s) taking into consideration:
 - a. the needs of rural and medically underserved communities,
 - b. health equity and health disparities (social and medical needs),
 - c. social determinants of health,
 - d. burnout, and
 - e. barriers to seeking mental health support for burnout in the workplace.



Promoting Resilience and Mental Health Among Health Professional Workforce

Program Requirements

4. Conduct a survey within 45 days of award to identify local or regional organizations that provide evidence-informed or evidence-based programs/protocols that promote resilience, mental health, and wellness within the context of addressing social determinants of health needs; providing community-based and culturally- competent services, financial and social support; and resources to the health professional workforce.
5. Develop or enhance strategies and interventions for rapid deployment (call center, hotline, consultation, referral, support groups for employees, motivational interviewing and behavioral health coaching, etc.) to address burnout and other workplace stressors for the health professional workforce.



Addiction Medicine Fellowship Program

Program Purpose

- Expand the number of fellows at accredited AMF and Addiction Psychiatry Fellowship (APF) programs trained as addiction medicine specialists who work in underserved, community-based settings that integrate primary care with mental health disorders and substance use disorder (SUD) prevention and treatment services.

Eligibility

- Eligible applicants include sponsoring institutions of accredited addiction medicine fellowship programs or accredited addiction psychiatry fellowship programs, or a consortium consisting of at least one teaching health center and one sponsoring institution of an addiction medicine or addiction psychiatry fellowship program.



Addiction Medicine Fellowship Program

FY 2022 Appropriation	\$ 22,690,653
Ceiling Amount	\$800,000/year
Number of Awards	43
Project Period	July 1, 2020 to June 30, 2025 (5 years)



Addiction Medicine Fellowship Program

Program Objectives

Increase the number of board-certified addiction medicine or addiction psychiatry sub-specialists produced per program annually by providing stipends for new addiction medicine or addiction psychiatry fellowship slots and additional program support to sponsoring institutions.

Collaborate and establish formal relationships with underserved, community-based settings (such as HRSA-supported health centers,² integrated behavioral health community health centers, Medication Assisted Treatment (MAT) facilities, and affiliated evidence-based substance use treatment centers) to provide training of AMF Program fellows at these sites.

Develop or enhance training for faculty from collaborating programs to create an infrastructure of skills and expertise that supports training fellows to provide opioid use disorder (OUD) and other SUD prevention, treatment and recovery services on integrated, interprofessional teams.



Addiction Medicine Fellowship Program

Program Type

Addiction Medicine Fellowship Program	32
Addiction Psychiatry Fellowship Program	6
Both Program Types	5
Total	43



Addiction Medicine Fellowship Program

Academic Year 2020-2021

Addiction Medicine Fellowship Trainees	Addiction Psychiatry Fellowship Trainees	Addiction Medicine Fellowship Graduates	Addiction Psychiatry Fellowship Graduates
84	14	53	10

Note: 2021-2022 data will be available in December 2022.



Integrated Substance Use Disorder Training Program

Program Purpose

- Expand the number of nurse practitioners, physician assistants, health service psychologists, and/or social workers trained to provide mental health and substance use disorder services in underserved community-based settings that integrate primary care, mental health, and substance use disorder services.

Eligibility

- Eligible applicants are Teaching health centers; Federally qualified health centers; Community mental health centers; Rural health clinics; Health centers operated by the Indian Health Service, Indian tribes, tribal organizations, or urban Indian organizations (as defined in section 4 of the Indian Health Care Improvement Act); Entities with a demonstrated record of success in providing training for nurse practitioners, physician assistants, health service psychologists, and/or social workers.



Integrated Substance Use Disorder Training Program

Program Objectives

Increase the number of practicing nurse practitioners, physician assistants, health service psychologists, and/or social workers who are trained to provide integrated mental health and SUD/OD services in a primary care underserved community-based setting.

Plan, develop, and operate a training program to provide mental health and SUD/OD services in underserved, community-based settings that integrate primary care, mental health, and SUD/OD prevention, treatment, and recovery services.

Increase the number of physician assistants and nurse practitioners that are trained in Medication Assisted Treatment (MAT) with a clinical training component and obtain a data-2000 waiver.

Establish a foundation of skills and expertise for the community-based program that supports training nurse practitioners, physician assistants, health service psychologists, and/or social workers to provide mental health and SUD/OD prevention, treatment, and recovery services utilizing a team-based care model.



Integrated Substance Use Disorder Training Program

Program Requirements

1. Provide training to practicing nurse practitioners, physician assistants, health service psychologists, and/or social workers, either by developing or enhancing a program, clinical rotation or training track in underserved community-based settings to provide integrated mental health and SUD/ODU services. The training must include team-based care practices for /prevention, treatment, and recovery services in settings that integrate primary care and mental health and SUD/ODU services. The interprofessional team may include community health workers (CHW), Peer Recovery Specialists, or other behavioral/mental health paraprofessionals.
2. Collaborate and establish formal relationships between one or more clinical community-based training sites and an academic institution to create a foundation of skills and expertise to provide mental health and SUD/ODU prevention, treatment, and recovery services on integrated, interprofessional teams.



Integrated Substance Use Disorder Training Program

Program Requirements

3. Develop and implement trainings for nurse practitioners, physician assistants, health service psychologists, and/or social workers to provide mental health and SUD/ODU treatment services, remotely via telehealth and other distance learning modalities.
4. Design team-based training approaches for participants to improve digital literacy for patients and their families impacted by mental health and OUD/SUD. The team-based training approaches to improve digital literacy may be carried out through teams that incorporate paraprofessionals.
5. Provide MAT Waiver training for physician assistants and nurse practitioners in community-based settings along with an additional clinical training beyond the didactic component.



Integrated Substance Use Disorder Training Program

Program Requirements

6. Support faculty/instructor/interprofessional training team development activities to support the ISTP program goals and objectives listed on page one of the NOFO.
7. Collect National Provider Identifier (NPI) numbers of participants who participate in the programs.
8. Provide information to participants throughout their training program about the National Health Service Corps (NHSC) programs, particularly the Loan Repayment Program, (<https://nhsc.hrsa.gov/loan-repayment/index.html>) as well as the Indian Health Service (IHS) Loan Repayment Program (<https://www.ihs.gov/loanrepayment/>) and provide guidance and resources to help them locate employment in NHSC approved sites after they complete the program.



Integrated Substance Use Disorder Training Program

Number of Awards	5 – Cohort 1 3 – Cohort 2
Ceiling Amount	\$2,575,000 up front funding
Range of Awards	\$2,074,240 - \$2,575,000 up front funding
Average Award	\$2,349,671 up front funding
Project Period	July 1, 2021 through June 30, 2026 (5 years) – Cohort 1 July 1, 2022 through June 30, 2027 (5 years) – Cohort 2



Primary Care Training and Enhancement – Integrating Behavioral Health and Primary Care Program

Program Purpose

- Fund innovative training programs that integrate behavioral health care into primary care, particularly in rural and underserved settings with a special emphasis on the treatment of opioid use disorder

Eligibility

- Eligible applicants are be accredited schools of allopathic or osteopathic medicine, academically affiliated physician assistant training programs, or accredited public or nonprofit private hospitals, or a public or nonprofit private entity that the Secretary has determined is capable of carrying out such grants.



Primary Care Training and Enhancement – Integrating Behavioral Health and Primary Care Program

Academic Year 2020-2021

Number of Individuals Trained	% of Individuals Who Received Opioid Use Treatment Training	% of Individuals Who Received Social Determinants of Health Training
1,849	70	23

Note: 2021-2022 data will be available in December 2022.



Primary Care Training and Enhancement – Integrating Behavioral Health and Primary Care Program

Program Objectives

Enhance primary care training in integrated behavioral health and primary care and advance primary care clinical training sites using the Framework for Levels of Integrated Healthcare.

Initiate new or enhance existing training in opioid and other substance use disorders, including clinical experiences in opioid and other substance use disorders, Medication Assisted Treatment (MAT), and enhancements to the clinical training sites and faculty development as needed.

Develop and implement a systematic approach to improve trainee and provider wellness.



Primary Care Training and Enhancement – Integrating Behavioral Health and Primary Care Program

Number of Awards	9 (one in 9 of the 10 HHS Regions)
Ceiling Amount	Up to \$400,000
Range of Awards Year for 2022	\$392,000 -\$400,000
Project Period	July 1, 2019 through June 30, 2024 (5 years)



NEW PROGRAM: Primary Care Training and Enhancement - Residency Training in Mental and Behavioral Health

Program Purpose

- Train primary care residents in the prevention, identification, diagnosis, treatment, and referral of services for mental and behavioral health conditions for the pediatric, adolescent, young adult, and other populations who are at-risk or have experienced abuse, trauma, or mental health and/or substance use disorders, including those related to the effects of gun violence.

Eligibility

- Eligible entities include accredited public or nonprofit private hospitals, schools of allopathic medicine or osteopathic medicine, or a public or private non-profit entity which the Secretary has determined is capable of carrying out a residency training program in family medicine, general internal medicine, general pediatrics or combined internal medicine and pediatrics (“med-peds”), which for the purposes of this NOFO are programs accredited by the Accreditation Council for Graduate Medical Education (ACGME).



NEW PROGRAM: Primary Care Training and Enhancement - Residency Training in Mental and Behavioral Health

Due Date for Applications	November 15, 2022
Number of Awards	Approximately 23 grants
Anticipated Annual Available Funding and Total funding over five years:	\$11,500,000 annual available (5-year project period)
Ceiling	Up to \$500,000 per award
Project Period	December 31, 2022 through September 29, 2027 (5 years)



NEW PROGRAM: Primary Care Training and Enhancement - Residency Training in Mental and Behavioral Health

Program Objectives

Increase the number of primary care physicians who are trained in the prevention, identification, diagnosis, treatment, and referral of services for mental and behavioral health conditions.

Develop or expand partnerships with integrated behavioral health and primary care settings and community-based organizations to provide clinical rotations for at least one month in duration for primary care residents.

Develop or enhance mental and behavioral health content in didactic and clinical training for primary care residents including suicide prevention, trauma informed care including abuse and gun violence; materials must be culturally and linguistically competent.



Contact Us

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Questions



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