

# Technology Solutions to Address one of the World's Continued Taboo Ailments: Mental Health

Michael Wong 19 April 2016

Shame, stigma, fear, and uninformed; these are just some of the words to describe the challenges of addressing an ailment (mental health) that The World Health Organization estimates affect nearly 450 million people around the globe. Representing 12 to 14% of the world's burden of disease but having less than 4% of the global health budget, what practical solutions are C-Suite executives deploying in their ecosystems to fix the calculus? In this Q&A, Dr. Nicoletta Tessler, SVP/CEO of Jackson Behavioral Health Hospital (one of the largest and most comprehensive public-academic psychiatric programs in the United States), explains the strategic levers that she and her team have leveraged in Miami-Dade, Florida and which might be considered by others who are burdened with limited resources.

**Q. Most of the C-Suite leaders whom I support mention how their respective entities have limited resources, so what makes your organization's needs different?**

A. Miami-Dade County is home to the largest percentage of people with serious mental illnesses (SMI) of any urban community in the United States. Roughly 9.1% of the population experience SMI, yet fewer than 13% of these individuals receive care in the public mental health system. Jackson Behavioral Health Hospital (JBHH) has long been a trusted service provider for a diverse community with a wide range of needs. The behavioral health sector needs transformational change, particularly here in America's most exciting urban center. We must expand its use of innovative and cost saving strategies to provide comprehensive care to the most vulnerable patients. In general, behavioral healthcare is facing an incredible challenge ahead with declining and uncertain revenue streams coupled with increased operating costs and administrative burden. Behavioral healthcare is not working either at the level of cost or humanity. As CEO, I have no choice but to implement a transformational strategy across a complex and high-volume institution while treating every behavioral-health patient as a unique individual with frequently interwoven issues of medical, psychological, behavioral, and trauma-related needs. I am focusing on process innovation to bring humanity back to behavioral healthcare, both for the impacted individuals and providers. This journey can't just be a job because the behavioral healthcare system is broken in a larger-than-business way. We need guts and determination.

**Q. With Miami, the city has one of the highest**

**Hispanic-majority communities across the US. Given the diversity within the Latino population (Cuban, Mexican, etc.); how does JBHH effectively provide mental health support to these patients, especially given the stigma challenges of this ailment within many of these sub-communities?**

A. Miami-Dade has the largest and most ethnically diverse population in Florida; and South Florida has the third largest and 10th most concentrated population of non-English speakers in the U.S., so cultural and linguistic issues need to be addressed along with health problems. Part of our talent management strategy is recruiting staff who possess cultural competencies to effectively engage with these patients and/or their caregivers. By investing in this recruitment approach, we're able to maintain focused attention on innovation (robotics, etc.) versus having to burn cycles on fixing challenges such as repairing relationships due to ineffective communications between our staff and the patients as well as their caregivers." Yet elevating outcomes for these populations will require new information technology and system-level changes at a population level to identify and deliver the right intervention to the right patient at the right time. Given the databases that are available in Florida's behavioral health system and continue to expand; data analyses will play a critical role for JBHH in the future of behavioral healthcare, particularly for advocacy and for quality management purposes. Data used in this fashion can help

build consensus and will facilitate an examination of the current system's design yielding opportunities to look for expanding existing or at-risk behavioral health patients. Regularly providing data and feedback to providers in the context of quality assurance and improvement will also have a positive impact on achieving systems and outcomes progress. In fact, I have had the opportunity to lead the institution through a time of drastic change, particularly in behavioral healthcare. Some of these changes include creating multiple developmental partnerships with technology companies to employ telepsychiatry, robotics technology, mobile interaction platforms and digital health solutions to achieve a more efficient, standardized, technological-based process that can significantly reduce hospitalization occurrences and drive net operating income so that we remain grounded in core competencies that will position us for success tomorrow.

It is well known that behavioral healthcare lags behind other service lines with regards to leveraging technological solutions. This is a tremendous opportunity for a safety-net hospital such as ours to pave the way as a behavioral health information technology partner in advancing behavioral healthcare as it deserves. In fact, this will bring crucial insight into the real-world complexity of managing the operational and financial demands of a large organization in a state that is only beginning to accept the high costs of action and the higher costs of

inaction. In fact, we must challenge the status quo of behavioral health care delivery so that we can ever-improve the lives of those struggling with mental illness and our employees who serve them. Is that not the point? We are working for a movement bigger than ourselves and technology must be the vehicle to achieve our success, not the interference that holds us back. We must put in the work to see how hospitals and technology can reconcile. For example, electronic health records are useful for insurance adjusters, malpractice attorneys and government inspectors but not for providers. We need to fix this issue. Do you know that 50% of a psychiatrist's day is spent not treating patients? If we want to truly improve patients' lives, we need to start with giving providers back half of their working life so they can spend time doing what they love to do – caring for their patients. They would be different people, and so would our patients.

**Q. While it's great to see how your team and you have leveraged technology to help drive towards successful outcomes for your entity, how do you get other stakeholders to engage in these operational approaches? Don't they sometimes have differing agendas and priorities?**

A. Within our community, there are multiple entities that support our patients and you're correct that there are sometimes different priorities and timelines. Still, our ecosystem has had the benefit of its Public Health Trust

(PHT), which was created over four decades ago (in 1973) as an independent governing body concerned with the county's most vital healthcare resource: Jackson Health System. More than \$220 million of PHT's revenues come from local property and sales tax expressly dedicated to providing medical care for indigent county residents. JBHH critically values key strategic alliances with stakeholders and maintains hyper focus on expanding our reach by facilitating cross-system collaboration and coordination of services within the community. As such, we served as a critical liaison in developing an ecosystem diagnostic profile by performing a "health test" of the system's baseline as compared to a future state vision to define the gaps across the ecosystem and outline the path from current state to future target state. We also assisted in solution capability recommendations to improve patient outcomes for individuals with SMI and reduce costs to the system, including reduced hospital readmission rates, incarceration and homelessness across the county. Finally, we assisted in the development of simulation of the system of care that supported predictive financial modeling and linked specific capabilities to potential decreases in negative outcomes.

As you know, there are changing expectations and demands on behavioral healthcare to improve outcomes and reduce costs that impact the total health of an individual. Individuals with co-occurring physical and mental conditions represent a significant and costly

portion of the population. In fact, comorbidity is more the rule than the exception. More than 68 percent of adults with a mental disorder have at least one medical condition. Comorbidity is associated with elevated symptom burden, functional impairment, decreased length and quality of life and increased costs. In fact, individuals with serious mental illness die, on average, 25 years earlier than the general population— mostly because of complications related to co-morbid chronic conditions (e.g., heart disease, obesity, diabetes). Hence, JBHH is focused on technology enhancements as a necessary step forward to better understand the role that behavioral health can play in impacting overall health. We aim to understand the role of behavioral health within a population health model, by first identifying ways that behavioral health can reduce costs and improve outcomes for medical patients, as well as new ways to better serve psychiatric patients who often have complex and costly medical needs.

Finally, behavioral health organizations must be able to demonstrate our value not only to our patients but also to key players in these new health care consortia. We must make choices as organizations and in order to remain viable in tomorrow's behavioral health arena, we must continue to focus on our core business. We need to ensure that care is effective, efficient, and appropriate. We need to focus on the connection between clinical quality and cost efficiency so that we provide value to

patients that centers on the health of our population versus just outcomes. Finally, everyone must focus on their strategic capabilities to engage accordingly. For JBHH, our focus is on health information technology. We are passionate about innovation. We will drive innovation and new ideas that anticipate the future state and needs of behavioral healthcare and work to meet them now.

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