

### Texas House of Representatives Committee on Public Education Interim Charge One, Request for Information

# The Texas Child Mental Health Care Consortium

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#### Texas Child Mental Health Care Consortium

#### <u>Overview</u>

The Texas Child Mental Health Care Consortium (TCMHCC) was created by the 86<sup>th</sup> Texas Legislature in Senate Bill 11 (SB 11) to address gaps in mental health care for children and adolescents in Texas. Through the TCMHCC, Texas has a unique opportunity to implement evidence-based programs across the state and to enhance the collaboration of the state's many health-related institutions (HRIs), state agencies and nonprofits. Building on the ability and success of existing programs at these institutions, new programs are being developed and improved in conjunction with local school districts and local community mental health providers. The work of the TCMHCC also addresses the shortage of psychiatrists in Texas by providing additional training opportunities and fellowship programs.

The TCMHCC was funded by the Legislature through the Texas Higher Education Coordinating Board (THECB), which was appropriated \$99 million for the work of the Consortium in Rider 58 under House Bill 1.

The TCMHCC is responsible for implementing the following initiatives:

- Child Psychiatry Access Network (CPAN): A network of child psychiatry access centers based at the HRIs that will provide child and adolescent behavioral health consultation services and training opportunities for pediatricians and primary care providers (PCP).
- 2) **Texas Child Health Access Through Telemedicine (TCHATT)**: Telemedicine or telehealth programs using HRIs to support local school districts (ISDs) to assist schools in identifying and assessing the behavioral health needs of children and adolescents and providing access to mental health services.
- 3) **Community Psychiatry Workforce Expansion (CPWE)**: Full-time academic psychiatrists are funded to serve as academic medical directors at facilities operated by community mental health providers, and new psychiatric resident rotation positions are established at these facilities.
- 4) **Child and Adolescent Psychiatry Fellowships (CAP Fellowships)**: This program expands both the number of child and adolescent psychiatry fellowship positions in Texas, and the number of these training programs at Texas HRIs.
- 5) **Research**: Development of a plan to promote and coordinate mental health research across state university systems in accordance with the statewide behavioral health strategic plan developed by the Texas Health and Human Services Commission (HHSC).

#### Governance Structure

A Governance Plan for the TCMHCC was approved on September 11, 2019, and includes the following information:

- Structure and duties of the TCMHCC and the Executive Committee, and the process for the selection and termination of Executive Committee members
- Duties of the Presiding Officer
- Duties of the Administrative Support Entity
- Workgroup formation and purpose
- Links to other statewide committees

The complete governance document is included in the LBB Implementation Plan, which can be accessed at the following link: <u>https://utsystem.edu/pophealth/tcmhcc/assets/files/resources/TCMHCC-</u> <u>Report%20to-the-LBB.pdf</u>

#### Executive Committee

The TCMHCC is governed by an Executive Committee comprised of individuals representing the Chairs of Psychiatry plus one additional representative from the following HRIs: Baylor College of Medicine (BCM), Texas A&M University System Health Science Center (TAMHSC), Texas Tech University Health Sciences

Center (TTUHSC), Texas Tech University Health Sciences Center at El Paso (TTUHSCEP), University of North Texas Health Science Center at Fort Worth (UNTHSC), The Dell Medical School at the University of Texas at Austin (UT Austin Dell), The University of Texas MD Anderson Cancer Center (MDA), The University of Texas Medical Branch at Galveston (UTMB), The University of Texas Health Science Center at Houston (UTHSCH), The University of Texas Health Science Center at Houston (UTHSCH), The University of Texas Health Science Center at San Antonio (UTHSCSA), The University of Texas Rio Grande Valley (UTRGV), The University of Texas Health Science Center at Tyler (UTHSCT), and the University of Texas Southwestern Medical Center (UTSW). Additionally, a representative from each of the following entities is included in the Executive Committee: Texas Council of Community Centers, HHSC (two representatives), Meadows Mental Health Policy Institute, Hogg Foundation for Mental Health, THECB, Dallas Children's Hospital, Baylor Scott and White Hospital, and UT System.

The Consortium holds Executive Committee meetings once monthly. Proceedings follow Open Meetings requirements, and are recorded and archived on the TCMHCC web site: <u>https://tcmhcc.utsystem.edu/</u>

Rider 58 required the TCMHCC to develop a plan to implement the five mental health initiatives outlined in the rider. The Implementation Plan was approved by the Executive Committee on November 22, 2019 and submitted to the LBB on November 25, 2019. The Plan, approved by the LBB on January 16, 2020, can be found at: <u>https://utsystem.edu/pophealth/tcmhcc/assets/files/resources/TCMHCC-Report%20to-the-LBB.pdf</u>

The Plan specified that the TCMHCC would evaluate further opportunities to use remaining unallocated appropriated funds in line with the legislative intent of SB 11. With the emergence of COVID-19 on implementation activities, the Legislative Budget Board (the LBB) was notified in May 2020, that the Consortium decided to not pursue the use of these funds, and instead returned \$10 million back to the legislature.

#### Central Administration

Under Rider 58, the Consortium was able to designate an institution of higher education to serve as its administrative coordinator, which was to then contract with the THECB. UT System was selected by the Executive Committee in August 2019 to provide this overall administrative support for the Consortium. Additionally, Dr. David Lakey, Vice Chancellor for Health Affairs and Chief Medical Officer for UT System was selected as the Consortium's presiding officer. UT System and the THECB entered into an interagency contract on September 11, 2019.

Support through this contract provides funding for key administrative personnel positions such as the Consortium Executive Director and project manager. Significant additional in-kind support is provided by UT System from multiple offices, including the offices of health affairs and governmental relations. Functions provided by UT System include overall coordination and management of the TCMHCC, including managing the public TCMHCC website and communications strategy; overall budget and project management; legal support; analysis of the initiatives through internal and external evaluation contracts; and reporting to the LBB and other entities. Participating Institution Agreements were executed in February 2020 between UT System and each of the HRIs implementing the CPAN, TCHATT, CPWE and CAP Fellowship initiatives.

The TCMHCC executive committee believes that both internal and external analysis and evaluation of its initiatives are essential to enhance their quality and effectiveness. In May 2020, the Texas Institute for Excellence in Mental Health at the University of Texas at Austin was selected to conduct the internal evaluation. The team will work alongside the UT System team in the day-to-day evaluation of TCMHCC initiatives. The TCMHCC executive committee also believed that an external evaluation team with no potential conflicts of interest was needed to provide a frank and unbiased analysis of all of its initiatives. In August 2020, UT System released a Request for Proposals to select an entity to conduct this external evaluation, which will be provided to policymakers and Consortium members. This external evaluation will provide cost, process, and outcome assessments to guide quality improvement and decision making for

future program implementation and dissemination planning. Selection of this entity will occur in September 2020.

#### Centralized Operations Support Hub (COSH)

In order to facilitate the consistency and quality of the CPAN and TCHATT initiatives, the TCMHCC executive committee made the decision to centralize administrative and technical support by creating a Centralized Operations Support Hub (COSH). On February 21, 2020, the executive committee through a competitive process selected Baylor College of Medicine (BCM) to serve in this role. An Agreement between BCM and UT System was executed on March 27, 2020. The COSH provides support that includes:

- 1) A centralized communications system that links all CPAN sites. BCM procured a communications system, called Lantana, that enables PCPs from across Texas to call one statewide number, 1-888-901-CPAN, to access consultations from child psychiatrists. The COSH answers calls for CPAN and routes them to the appropriate HRI in the region where the call originated.
- 2) A centralized data management system that links patient care information across both the CPAN and TCHATT service lines to help facilitate coordinated care, track engagement with PCPs, and automate reporting. BCM procured a data management system, called Trayt, that will be used to capture service interactions, key metrics and outcomes. This secure system will be used to monitor usage of services and provide valuable insight into the effectiveness of the programs. Privacy and information security have been and will remain priority areas of focus during development, deployment and on-going use of the system. A comprehensive information security risk assessment was completed on the vendor and the system with no issues of concern found. Management and technical controls are being put into place to ensure data access is highly restricted to only those individuals that need access.
- 3) Medical Director. This position, filled by Dr. Laurel Williams, provides high level coordination and facilitates collaboration between physicians providing CPAN and TCHATT consultations. Dr. Williams reviews and shares best practices and guidelines and reviews the overall outcome data of the individual sites, using tools such as Project ECHO to facilitate peer-to-peer learning and continual quality improvement.

As TCMHCC initiatives roll out across Texas, the COSH will continue to assist the HRIs in reaching their goals. COSH staff provide training, trouble shoot, and guide and help implement TCMHCC initiatives as needed.

#### Implementation Status of Consortium Initiatives

Shortly after execution of Participating Institution Agreements between UT System and the HRIs, the COVID-19 pandemic began to impact implementation efforts in the following ways:

- Delayed start up of all TCMHCC initiatives, resulted in lapsed spending of FY 2020 revenue.
- Some HRIs instituted hiring freezes which impacted the ability to expeditiously fill positions funded by the TCMHCC.
- Schools moved from in-person to on-line learning, which slowed the ability to meet with school districts, establish relationships with campus personnel in TCHATT schools, and provide school-based telehealth services as required through TCHATT.
- Communications and marketing strategies for CPAN and TCHATT, including the provision of outreach and dissemination of information to PCPs and school districts, moved from in person to on-line or phone-based contacts.
- Pediatric clinic volumes dramatically decreased, leading to initial decreased demand for CPAN consultations.

Despite these challenges, TCMHCC's initiatives have proceeded, with certain accommodations to address the impact of COVID-19. TCMHCC has been working in partnership with the Texas Medical Association, Texas Pediatric Society, Medicaid Managed Care organizations and others to educate their organizations

and members about the availability of TCMHCC services. Updates on implementation of each of the initiatives are as follows.

#### Child Psychiatry Access Network CPAN)

CPAN is a network of psychiatrists, based at the HRIs, that provides consultation services and training opportunities for PCPs to improve the care of children and adolescents with behavioral health needs. If a patient needs to be seen by a mental health specialty care provider on an on-going or frequent basis, s/he will be referred to a mental health provider for on-going behavioral healthcare.

In May 2020, a centralized telephone number, 1-888-901-CPAN, went live state-wide as the means for PCPs to access CPAN consultations. Interested PCPs enroll in CPAN by completing a Practice Aareement. An example of this agreement can Participation be accessed at: https://utsystem.edu/pophealth/tcmhcc/assets/files/resources/Sample-Texas-CPAN-Practice-Participation-Agreement.pdf. To date, CPAN receives approximately 7-8 calls per day. It is expected that the number of calls will increase as more PCPs are made aware of the initiative and as more families seek medical treatment once COVID-19 related restrictions are relaxed.

As of September 28, 2020, approximately 1,900 PCPs are enrolled in CPAN and 9 HRI teams are fully operational. CPAN's success is largely dependent on the development of trusting relationships with PCPs. While it has been more difficult to reach out to PCPs due to COVID-19 restrictions, CPAN teams are finding creative ways to engage and enroll providers. As the State starts to open back up, CPAN teams will begin a campaign that includes face-to-face engagement and PCP relationship-building activities.

#### Texas Child Health Access Through Telemedicine (TCHATT)

TCHATT creates or expands telemedicine and telehealth programs to identify and assess the mental health needs of at-risk children and youth, providing short-term, school-based access to services. The initiative aims to maximize the number of school districts served in diverse regions of Texas. To date, HRIs are actively engaging schools to develop agreements for the provision of TCHATT services. As of September 1, 2020, approximately 138 school districts were working with TCHATT, covering 1,334 schools. Additionally, the HRIs are partnering with Local Mental Health Authorities (LMHAs) and Texas Education Agency regional teams.

As schools moved from campus-based to virtual learning, TCHATT teams switched to serving students in their homes via tele-medicine. Referrals from school counselors were down during summer months, but since the beginning of the school year in the Fall of 2020, teams have adjusted to providing virtual services to students both in school and at home. Engagement with schools has continued with TCHATT services being offered to students following referral by school counselors. As children start to transition back into schools, TCHATT teams will see children in school via telemedicine.

#### Community Psychiatry Workforce Expansion (CPWE)

The Community Psychiatry Workforce Expansion (CPWE) funds community psychiatric workforce expansion projects through partnerships between HRIs and community mental health providers. The partnerships provide training opportunities for residents under an academic medical director provided by the HRIs. To date, HRIs are involved with 17 community mental health providers. Due to COVID-19, CPWE partnerships with community mental health providers have expanded the use of telepsychiatry, which has enabled additional partnerships with Local Mental Health Authorities in rural areas of the state.

#### Child and Adolescent Psychiatry (CAP) Fellowships

The CAP Fellowship initiative has allowed HRIs to add fellowship capacity within their departments of psychiatry. To date, seven additional first-year and one second-year Child and Adolescent Psychiatry Fellowship (CAP) positions have been filled. The HRIs are anticipating that 12 additional CAP positions will

be filled in 2021. In addition to the expansion of positions available within existing programs, 4 new fellowship programs will be established in 2021 and 2022.

#### Research

The TCMHCC research initiative has created a state-wide network across 11 departments of psychiatry at state-funded HRIs to improve the delivery of child and adolescent mental health services in Texas in alignment with the state-wide Behavioral Health Strategic Plan. The network is structured into two centralized research hubs: one focused on youth depression and suicide, and one focused on childhood trauma. The goals of the research projects are: 1) to better understand and improve mental health services to address youth trauma, depression and suicide and, 2) to identify regional and state-wide service delivery gaps to inform policy makers and to improve the health care of youth in Texas.

The youth depression and suicide hub is led by Dr. Madhukar Trivedi at UTSW and co-led by Dr. Sarah Wakefield at TTUHSC. The purpose of this research network is to improve the evaluation of and response to the increasing problem of youth depression and suicide in Texas. This will be accomplished by evaluating the healthcare system in Texas as it relates to screening, responding, and monitoring youth symptoms indicative of depression and/or suicidal behaviors; and examining if the different ways in which youth depression presents in a primary care setting (i.e. sad v. irritable) might correlate with a best response with certain treatment (i.e. cognitive behavioral therapy v. supportive therapy). The childhood trauma hub is led by Dr. Charles Nemeroff at UT Austin Dell, and co-led by Dr. Karen Wagner at UTMB. The purpose of this research network is to identify the mental health outcomes of acute and chronic trauma for children and adolescents, identify risk and protective factors, and identify best practices to improve the mental health of children and adolescents in Texas who have experienced trauma.

Each hub is collaborating with the HRIs involved in the research study to develop protocols and research methods. Agreements between UT System and each of the HRIs involved are nearly complete. An acculturation, ethnicity and patient advocacy committee has been created to assure the incorporation of a health equity lens and to assure individuals with lived experience are part of the development and implementation of the research initiative.

#### Summary

During the 1<sup>st</sup> year of the 2020-21 Biennium, the TCMHCC structure has been created, including the establishment of governance, administrative oversight and centralized operations support functions. Despite some unforeseen setbacks due to COVID-19, planning and implementation activities continue and HRI operation of the CPAN, TCHATT, CPWE, CAP Fellowships and Research initiatives has begun. In some instances, accommodations have been made to assure TCMHCC behavioral health initiatives are accessible to home-bound children, youth and families. Marketing and outreach activities have largely focused on the use of social media, email and telephone calls. However, as the State begins to lift some restrictions due to COVID-19, the CPAN and TCHATT teams will build a more robust marketing campaign that includes face-to-face engagement and relationship-building activities.

It is anticipated that, with base funding, the TCMHCC will continue roll-out and full implementation of all initiatives within the 2022-23 Biennium. This includes: use of targeted outreach activities to expand enrollment of PCPs into CPAN; initiation of CPAN training and support efforts; increasing the capacity of TCHATT services as partnerships continue to grow between the HRIs and school districts; engagement of families in the research initiative; and further enhancements to the COSH infrastructure, including expanded use of technology to support HRIs.