

BY RHONDA STRIBLING

RN, Clinical Director, Workforce Absence

As those who have experienced behavioral health concerns first-hand know, the struggle to overcome issues ranging from depression and anxiety to alcohol and substance abuse is real, frightening and often debilitating.

Unfortunately, many times people with behavioral health issues suffer in silence for months or even years...and that must change. We need to start answering some of the more difficult questions related to mental health. We need to speed the process of accessing care for those in need, so they can return to a sense of normalcy in their life and work.





THE SIZE OF THE PROBLEM

Achieving such a goal presents numerous but not insurmountable obstacles. Behavioral health problems in the workplace are not a simple area to address, or a niche issue affecting a few. According to the Integrated Benefits Institute (IBI)¹, one out of four people will have a diagnosable mental health condition in their lifetime. Despite the prevalence, two-thirds of people never receive care. That stat is especially concerning as conditions can worsen over one's lifetime.

Understandably, the scope and depth of the problem have led to issues, challenges and, of course, increased costs in the workplace. According to a recently released FAIR Health Study², claims with mental health diagnoses increased 108% as a percentage of all medical claims from 2007 to 2017...stop and think on that escalation for a moment.

Now consider just one component of behavioral health — depression. People suffering from depression submit an average of \$14,967 per year in claims, compared with \$5,929 a year for the total population according to a 2018 review³ of claims data from Willis Towers Watson. Additionally, those with depression make six times as many emergency room visits as the overall population.

Thomas Parry, president of the IBI, notes that not only do most employees who say they are depressed never get treatment; often their cases do not show up in medical and pharmacy claims. Poor access to data makes it difficult for employers to understand the impact of behavioral health problems on their organizations.

Additionally, most mental health treatment is out of network and lacks care coordination, increasing costs and reducing effectiveness, says a study⁴ conducted by the National Alliance of Healthcare Purchaser Coalitions.

Overall, the Centers for Disease Control and Prevention (CDC) estimates that behavioral health-related problems, including depression, anxiety and addiction, cost the U.S. healthcare system and employers \$237 billion every year.

EMPLOYERS ARE LOOKING FOR ANSWERS

While the problems are significant, employers are just now starting to catch up to the need for more comprehensive diagnosis and treatment. At a recent IBI and Pacific Business Group on Health Symposium⁵ held in San Francisco, several large employers including Boeing, Microsoft, Johnson & Johnson, Teledoc and Ernst & Young met to discuss the issue and solutions. As we have at several previous symposiums, Sedgwick attended and contributed significantly to the event's agenda and content. Sedgwick's Bryon Bass, SVP, Workforce Absence, was a presenter, and several of our colleagues and clients attended.

Attendees identified a number of solutions as critical to adequately address the challenges behavioral health issues present in the workplace. These include:

- 1. Connect people to care by making it socially acceptable to address mental health within your organization
- 2. Make access to care easier, including having in-house therapists and appointment times within the workday
- **3.** Integrate mental health with primary care to ensure whole-person care
- **4.** Engage and integrate employee assistance programs (EAP) and recognize old-school approaches may no longer work (for example, Gap/Old Navy changed the name of its EAP to "Benefits Concierge Service")
- **5.** Ensure early intervention as it can help lower claims while it helps employees access needed care

SEDGWICK'S ONGOING INNOVATION IN BEHAVIORAL HEALTH

Sedgwick agrees with the recommendations outlined at IBI and has already taken steps to put those recommendations, as well as others, into place for its clients. Working with employers to ensure that mental health services are a core component of workers' compensation and disability programs has been a foundation of Sedgwick's programs for decades.



As part of our continuous commitment to finding new ways to care for workers, we've recently introduced a behavioral health program for workforce absence (see sidebar). We also are committed to taking steps that make a difference for our clients' employees, for both workers' compensation and disability programs. For example, our behavioral health programs stress the following core elements:

- Intervene as early as possible in the process
- Gather more clinical information before receiving medical so that a claim decision can be recommended more quickly
- Enhance collaboration among the associate and disability specialist
- Enhance awareness and knowledge for the associate and disability specialist
- Emphasize best practice treatment protocols and entertain transitional return-to-work (RTW) options wherever possible
- Provide a wide range of resources to help workers better manage their condition (EAP, wellness programs, etc.)
- Take a more active role in supporting a healthy and safe return to work through conversations with the associate and healthcare provider

Sedgwick data tells us that the earlier we identify problems and begin treatment, the lower the costs and the faster the return to work. This guiding principle is true for workplace injuries as well as behavioral health challenges. Incorporating programs that ensure fast access to quality behavioral health support is vital to the success of employers today. Our knowledge-based economy needs workers who are physically, emotionally and mentally healthy to ensure they perform their tasks at the optimum level and can compete on a global stage.

It's part of our **caring counts**® philosophy to ensure our clients' employees get the highest level of appropriate care for all workplace-related injuries and illnesses. We'll be sharing more about the importance of strong behavioral health programs and outcomes from Sedgwick's new program in the coming months. If you have questions, or need support yourself, please contact us at sedgwick@sedgwick.com.

REFERENCES

1) IBI/PBGH Symposium White Paper: Mental Health is Bigger than Mental Health. Integrated Benefits Institute. https://www.ibiweb.org/wpcontent/uploads/2019/06/ ProgramHighlightsMay21.pdf

2) Spotlight on National Behavioral Health Trends. FAIR Health. May 2019.

https://s3.amazonaws.com/media2.fairhealth.org/whitepaper/asset/
Spotlight%20on%20National%20
Behavioral%20Health%20Trends%20
-%20A%20FAIR%20Health%20
White%20Paper%20-%20May
%202019.pdf

3) Anxiety is expensive: Employee mental health costs rise twice as fast as all other medical expenses. CNBC.com. September 27, 2018.

https://www.cnbc.com/2018/09/26/employers-are-starting-to-think-about-healthy-differently.html

4) Achieving Value in Mental Health Support. National Alliance of Healthcare Purchaser Coalitions. September 2018.

https://higherlogicdownload. s3.amazonaws.com/NAHPC/3d988744-80e1-414b-8881-aa2c98621788/ UploadedImages/Achieving Value in Mental Health Support Report Final 9 12 2018.pdf

5) IBI/PBGH Symposium. May 21, 2019. https://www.ibiweb.org/mental-health-is-bigger-than-mental-health-agenda/

Sedgwick's clinical behavioral health program expands into workforce absence

In July, Sedgwick launched its first clinical behavioral health program for our workforce absence clients, designed to ensure that workers with issues get prompt access to best in class mental health services. Building on Sedgwick's existing behavioral health solution, the new program places an even greater emphasis on clinical engagement for behavioral health in workforce absence scenarios, as well as the use of technology, communication and collaboration between the employee, providers and team.

In just a few months, the program has begun to significantly help our clients' employees with behavioral health needs. These are employees who may have suffered in silence — or worse — had they not accessed the services offered. Here are just a few examples of employees whose support has been accelerated through this new program:

An employee we spoke with confessed she had considered suicide. She had a history of depression with previous suicide attempts in her teens. She indicated that she had young children who needed her, which was preventing her from trying again, but that the compulsion to kill herself still crept into her daily life. She noted that she couldn't afford therapy and didn't know where to turn. We warm transferred her to her employer's EAP and checked in with her the following day. We spoke with her behavioral health practitioner to ensure awareness and reached out advocacy program options to help her obtain the treatment she needed.

A young man was pulled over by police and accused of committing a crime, which he did not commit. The accusation upset him to the extent that he was unable to drive or function at home or work. The man was already connected with his healthcare provider and seeking therapy, but we were able to direct him to the additional supportive resources of his employer's EAP.

A young woman who was held up by gunpoint was afraid to leave her home. Her fears impacted her work performance and productivity and were an issue of concern to her managers and colleagues. We were able to confirm she had an appointment with her healthcare provider and advised her of the benefits available through her employer's EAP.

In all these situations, because of Sedgwick's new program, the behavioral health clinician was able to quickly approve a plan of treatment even before receiving medical information, which helped the individuals focus on their well-being and better understand and access treatment options provided by their employer.

Close communication with the clinician and processes that ensure prompt access to care are the hallmarks of the program. There is an emphasis on follow up to ensure appropriate interventions are undertaken, as well as an enhanced effort to see that critical information about the employee is available to relevant parties. System notes help streamline and appropriately direct calls.

Through this process, Sedgwick will be able to better answer the following questions critical to ensuring workers with behavioral health access the care needed:

- Was the clinician able to talk with the associate?
- Was an EAP or another wellness benefit agreed to by the associate?
- Are there any RTW challenges that need to be addressed?
- Who did the worker speak with, a psychiatrist or other provider?
- What type of therapy (e.g., talk), is being provided?
- Was the RTW plan sooner than the provider and associate initially projected?
- At the end of the call, did the associate express any concerns or negative perceptions with the clinician's discussion?

While all of these steps are important, there is another important issue to address. To fully meet the needs of workers with depression, anxiety, substance abuse or other behavioral health concerns, we must take the stigma out of mental health and assure workers with such conditions that they will be treated just as any other colleague with an illness or disease.

MAKING A POSITIVE IMPACT

Mental health hits a broad swath of workers today, often during the prime of their careers. Programs such as Sedgwick's behavioral health initiative for workforce absence are an important, emerging option for employers to ensure employees have access to the care they need to return to productivity at work and to a better life at home. As a former client of Sedgwick's, I am truly excited to now be part of the team supporting and enhancing programs for those who rely on our care. Seeing firsthand how changes like these, and the meaningful interactions built into the process, can make such an impact on the cases we manage really helps us understand the power of caring counts!