

IS IT MORE THAN A ROUGH DAY? MENTAL WELLBEING, LET'S TALK ABOUT IT!

INSIGHT BEYOND INSURANCE WEBINAR SERIES

Presented by:

Gail Smith, MS, LMFT

Cigna Healthcare



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TOM KRYSTYN
Advisor
BKS-PARTNERS



NICOLE NEGVESKY
Director of Business Development
BKS-PARTNERS



GAIL SMITH, MS, LMFT
Behavioral Clinical Account Manager
CIGNA HEALTHCARE



LIFE, STRESS, AND MENTAL HEALTH

Our mental wellness can be impacted in many ways

Life challenges and stressors affect each of us differently, but we can all struggle at times

Coping well with stressors can play a role in maintaining good physical and mental health

Being aware and supportive can make a big difference

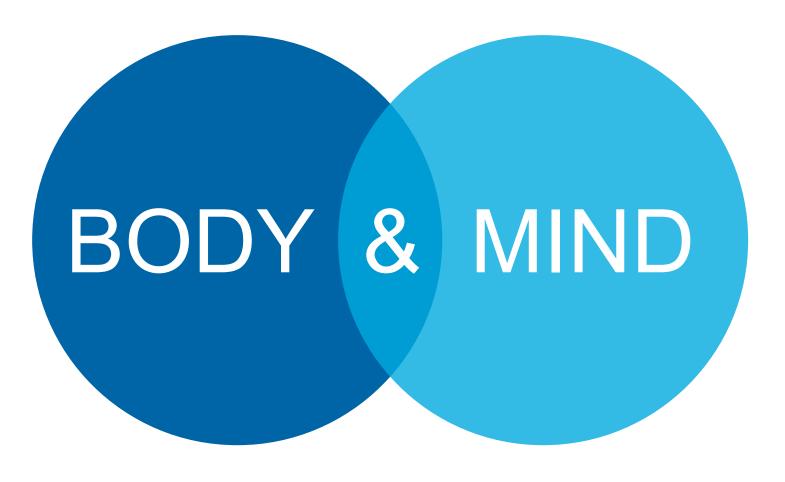


Stress

response that results when a person's (actual or perceived) resources are not sufficient to cope with life's demands and pressures. It can be intensified by the feeling of having little support or control.



WE TAKE A WHOLE PERSON APPROACH TO HEALTH CARE.



The body and mind are connected. An individual's emotional health can affect their physical well-being, and vice versa.



MENTAL HEALTH IN THE WORKPLACE



in the workplace experience a mental health condition



takes time off work for depression



are lost each time there's an episode of depression





WE LIVE IN A WORLD THAT IS STRESSED OUT.

Stress directly impacts the health of employees – and businesses.

84%

of the world's population is stressed.*

\$167B

is how much stress costs a year.**

*Cigna 360° Global Well-Being Survey, Cigna, 2019, wellbeing.Cigna.com.



^{**}The cost of work-related stress to society: A systematic review, Hassard et al., The Journal of Occupational Health Psychology Volume 23. Published January 2018.

STRESS CAN LEAD TO:*



Absenteeism



Lack of productivity







Share resources with employees, such as:

- Employee Assistance Program (EAP)
- Virtual behavioral care
- Lifestyle Management programs
- Health Information Line
- Self-directed digital tools



DEFINING LONELINESS.

Loneliness is subjective:

- Difference between feeling lonely or experiencing loneliness and being alone.
- Amount of social connection one wants to have vs. what they currently have.

This study built off of UCLA's Loneliness Scale:

- A 20-item scale design to measure one's subjective feelings of loneliness as well as feelings of social isolation.
- A score of 43 or higher is considered lonely.





TAKE THE LONELINESS QUIZ.



Are you feeling lonely?

This questionnaire from Cigna measures your feelings of loneliness and offers solutions to help increase your social connections.



The following 10 statements describe how people sometimes feel. For each statement, please indicate how often you feel the way described.

Scores are calculated at the end, followed by tailored solutions to help you stay well or feel better.

START



LONELINESS IN AMERICA BY THE NUMBERS.

70/0
increase in loneliness

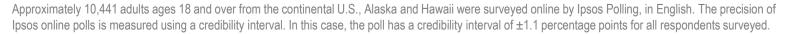
since 2018

90,000 lifetime hours people spend at work

61%

of workers or nearly 3 in 5 Americans are lonely







A MATERIAL IMPACT ON WORKERS.

Lower quality

3x more likely to say the quality of their work is lower than it should be.

Less careful

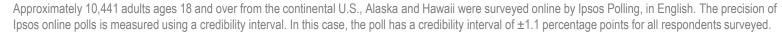
Lonely workers are also more than **twice as likely** to admit not doing their work as carefully as they should.

Less productive

3x more likely
than non-lonely
workers to admit they
are less productive
than most workers
with a similar job.

Higher churn

Lonely workers think about quitting their job more than twice as often as non-lonely workers.





WHAT WE CAN DO.

LONELINESS DRIVERS	HOW WE ADDRESS THEM
Environmental factors:TenureRemote workersSpecific industriesSeniority	 Employee Assistance Program (EAP): Emotional health Behavioral: Find a provider/therapist Employee Resource Groups (ERGs) Employee working lunch groups Peer support (iPrevail)
 Cultural issues: Poor relationships with coworkers Feeling the need to hide one's true self when at work Lack of shared goals Not finding work meaningful or fulfilling Eating lunch alone at their desk 	 EAP: Emotional health Behavioral: Find a provider/therapist Community-based support groups Mentorship Team goal-setting exercises Peer support (iPrevail) Onsite fitness centers
 Unbalanced use of technology Not being able to leave work at work 	 Onsite fitness centers Guidelines for use of technology and email/work "dark hours" Volunteer match service for local opportunities





THE IMPACT OF BEHAVIORAL HEALTH.

will struggle with mental illness this year¹

living with major depression¹

have a substance use disorder²

19%

living with anxiety disorders¹ 20%

with depression or an anxiety disorder also have a substance use disorder³

1. Mental Health By The Numbers, National Alliance on Mental Illness, https://www.nami.org/learn-more/mental-health-by-the-numbers, September 2019.

2. The National Survey on Drug Use and Health: 2017. Substance Abuse and Mental Health Services Administration. samhsa.gov/data/sites/default/files/nsduh-ppt-09-2018.pdf.

3. Statistics on Addiction in America, Addition Center, https://www.addictioncenter.com/addiction/addiction-statistics/, August 2019.



SEEKING CARE

What is the percent of adults in the United States with a mental health condition who receive treatment, in a given year?

- 1. 68%
- 2. 55%
- 3. 41%
- 4. 20%



SEEKING CARE

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- 1. 68%
- 2. 55%
- 3. 41%

Correct answer

4. 20%



BASIC FACTS ABOUT DEPRESSION.

What is depression?

A medical condition that can affect mood, behavior and the physical body

What does it look like?

Hopelessness, loss of enjoyment, disrupted sleep and eating, withdrawal, mood changes, feelings of guilt and low self-esteem

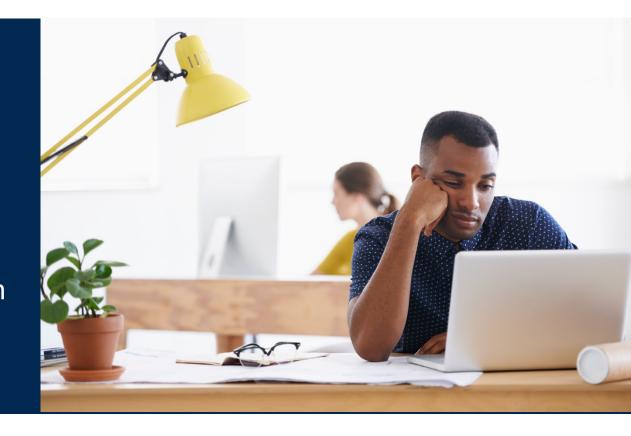
What causes it?

A combination of genetic, situational, and physical factors may be involved



BASIC FACTS ABOUT DEPRESSION.

- Causes, triggers, and symptoms can point to different diagnoses.
- Without treatment, duration is indefinite.
- 80% of people respond well to treatment, with an improvement in symptoms within weeks.





OBSTACLES TO SEEKING TREATMENT.

Embarrassment, the stigma of mental illness: "Only crazy people go to shrinks."

Believing depression is a personal weakness: "I just need to deal with it."

Limited information
about treatment:

"It costs too much,"

"It takes too much time."

A belief that treatment won't help or isn't deserved: "What's the point?"

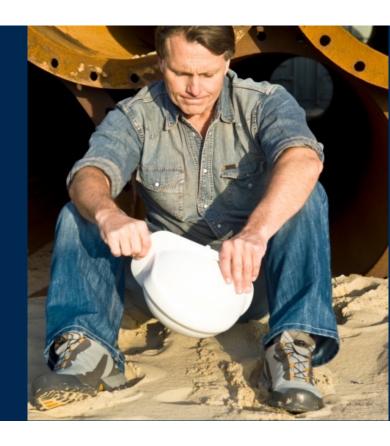
Denial: "I'm fine, just a little down."





POTENTIAL EFFECTS OF DEPRESSION IN THE WORKPLACE.

- Absenteeism and presenteeism
- Decreased productivity
- Missed deadlines, increased errors
- Fatigue or physical complaints interfering with work
- Safety problems, accidents
- Lack of cooperation
- Disconnect from teammates
- Morale problems





WHAT CAN YOU DO?

- Learn about depression
- Know the sources of help available
- Recognize when an employee shows signs that might be depression-related
- Move past any hesitation to address the issue





CRISIS

Warning signs:

- Hopelessness, helplessness
- Talking about death or wanting to kill oneself
- No reason to live
- Looking for access to means
- Feeling trapped, unbearable pain
- Anger and agitation
- Impulsive behavior
- Extreme mood swings
- Showing rage, seeking revenge



Risk factors:

- Substance use disorder, other mental illness
- Impulsive or aggressive tendencies
- Physical illness
- History of suicide attempt or family history of suicide
- Job or financial loss
- Lack of social support



IN A CRISIS



5.

Stay with them

O. S.

Obtain help

Safety first

When is it necessary to call 911?

National Suicide Prevention Lifeline:

1-800-273-TALK (8255)

Text 741-741



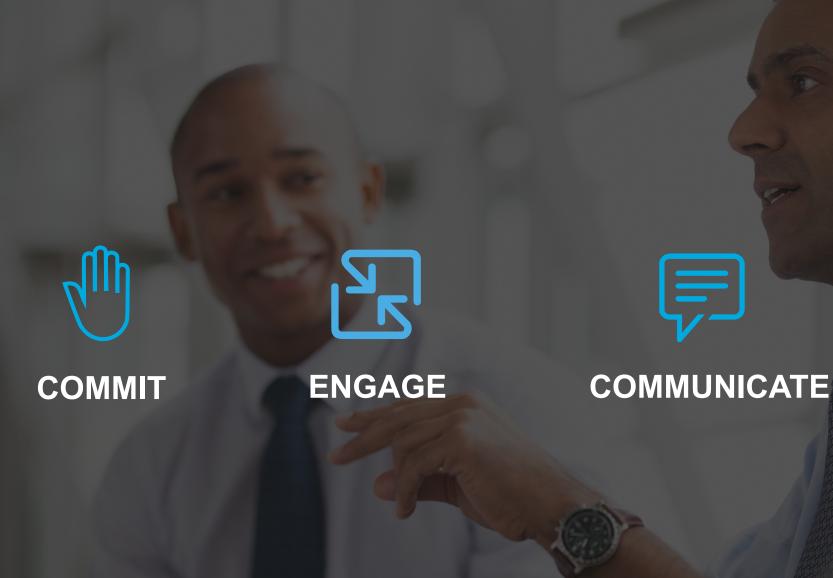
REACH OUT



- Find words to open the conversation
- Express your concern and support
- Listen; let them take the lead, treat them with dignity & respect
- Reassure that you care, avoid judgment
- Use "I" statements



ACTION ITEMS FOR EMPLOYERS.





COLLABORATE



INCREASING THE MENTAL HEALTH OF YOUR WORKFORCE.



- Secure senior management buy-in and ongoing support to improve gender health equity for all employees by finding and closing any health disparities.
- Seek feedback from diverse groups of employees about their experiences as health care customers.
- Establish wellness champions among employees to gain a better understanding of barriers to care, including benefit structure, and to promote initiatives to improve health.



INCREASING THE MENTAL HEALTH OF YOUR WORKFORCE.



• Educate employees on how to take advantage of benefits that will improve their health, such as the EAP and behavioral outpatient services.



INCREASING THE MENTAL HEALTH OF YOUR WORKFORCE.



- Review the health trends and demographic data of your workforce to determine primary cost drivers and potential gaps in care and services.
- Collaborate with your health plan to help build trust among employees, and better engage them in their benefits and programs to improve their health.



KEY ISSUES IMPACTING BEHAVIORAL HEALTH.

RESOURCES

Licensed clinicians

Facilities

Medications

Supplies

Infrastructure

ACCESS

Availability of services

Availability of clinicians

Transportation challenges in connecting with care

Affordability concerns

STIGMA

Stigma lessening, but still exists

Fear of employer finding out

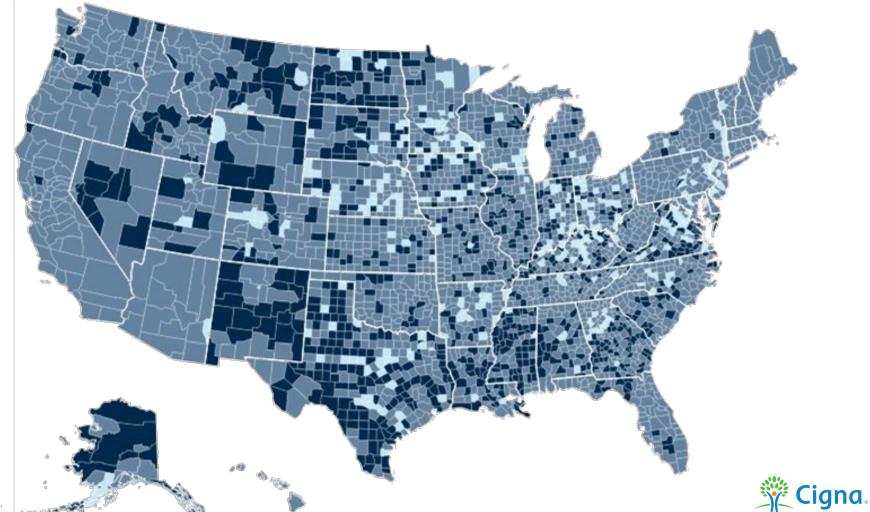


PRIMARY CARE PHYSICIAN SHORTAGE.¹

None of county is shortage area

Part of county is shortage area

Whole county is shortage area



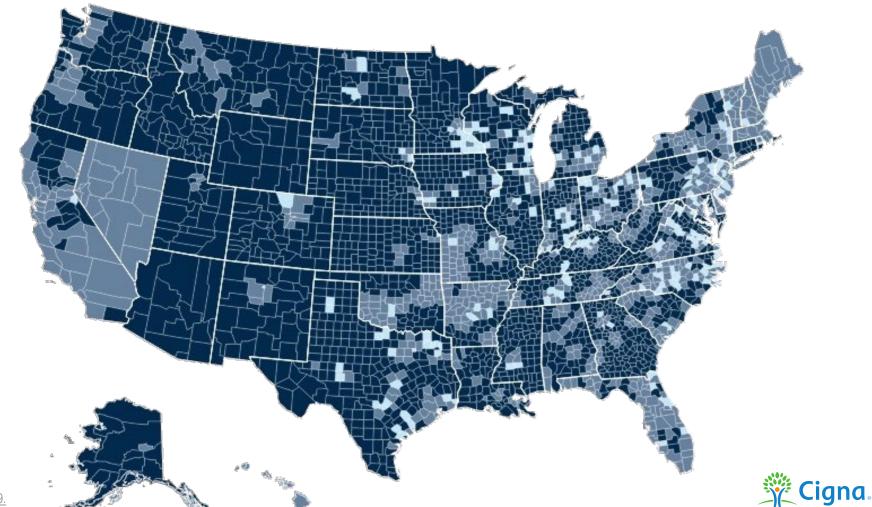
1. Rural Health Information Hub. 2017. ruralhealthinfo.org/data-explorer?id=210.

MENTAL HEALTH PROFESSIONALS SHORTAGE.¹

None of county is shortage area

Part of county is shortage area

Whole county is shortage area



1. Rural Health Information Hub. 2017. ruralhealthinfo.org/data-explorer?id=209.

BEHAVIORAL HEALTH VS. MEDICAL.

HARD TO RECRUIT

- Can run very successful business with fee-for-service model
- 40% of the psychiatry workforce practice in cash-only private practices¹

BEHAVIORAL PRACTICE SETTINGS

• Solo practices are common. Appx. **30%** of our network is solo practitioners²

GETTING AN APPOINTMENT

- National Committee for Quality Assurance (NCQA) guidelines for routine appointment is 10 business days³
- With psychiatrist shortage, especially child and adolescent care, wait times are longer – if you can even get an appointment⁴



- 1. "The Psychiatric Shortage: Causes and Solutions." 3/2018. National Council for Behavioral Health. thenationalcouncil.org/wp-content/uploads/2017/03/Psychiatric-Shortage_National-Council-.pdf.
- 2. Cigna unique provider data as of 7/1/19.
- 3. 2019 Standards and Guidelines for the Accreditation of Managed Behavioral Health Organizations, 2018, National Committee for Quality Assurance.
- 4. "Availability of Outpatient Mental Health Care by Pediatricians and Child Psychiatrists in Five U.S. Cities." 5/2017. International Journal of Health Services. journals.sagepub.com/doi/full/10.1177/0020731417707492.



CIGNA BEHAVIORAL NETWORK ACCESS. QUALITY.

Virtual Care

One of the largest virtual behavioral networks in the country

23K+ providers¹

MDLIVE behavioral services available 1/1/20.

Centers of Excellence

Mental Health COE

- Launched 1/1/20
- 228 access points
- OON cost 87% more/customer²

Substance Use COE

- 374 access points
- OON have 71% higher readmission rates³
- Opioid treatment subset of 126 access points

Locate on myCigna.com

Fast Access Network

Guaranteed appointments within 5 business days for EAP and therapy⁴

Launched Q1 2020

Locate on myCigna.com

Provider Collaboration

Connecting medical and behavioral providers through ACOs

First Responders

- 32% network growth1
- Specialized provider training

MAT

- 12% growth
- Peer support services

NETWORK GROWTH

19% growth in 2019¹

Added 27,504 providers and 48,534 access points to care

The behavioral network has grown 75% in the past four years.

175,000 Mental Health & Substance Use Providers

- 5,801 Facilities
- 168,645 Individual Practitioners



PROFFESIONALS WHO CAN HELP



PCP: determine possible physical cause, prescribe medication if needed, make a referral



Local community



Licensed mental health clinicians: therapists, clinical social workers, psychologists, psychiatrists



Encourage professional help if the person continues to experience symptoms after a few to several weeks (upset, fearful, anxious, depressed/withdrawn, unable to enjoy life etc.)



Certified Peer Specialists: specialists receive training



AN INNOVATIVE APPROACH TO MENTAL HEALTH:

Mental Health First Aid USA.1



- Mental Health First Aid is an 8 hour certification course that teaches participants how to recognize and support an individual who is experiencing a mental health crisis or problem until professional help can be obtained.²
- People are often unsure how to respond when a mental health crisis occurs.
 Mental Health First Aid teaches skills to provide initial help.
- Mental Health First Aid aims to increase mental health literacy and decrease the stigma around mental health problems.
- Mental Health First Aid is included on the Substance Abuse and Mental Health Services Administration's National Registry of Evidence-based Programs and Practices (NREPP).³



^{1.} Mental Health First Aid copyrighted 2015, National Council for Behavioral Health and The Missouri Department of Mental Health.

^{2.} Mental Health First Aid – https://www.mentalhealthfirstaid.org

^{3.} Mental Health First Aid, Research and Evidence Base, excerpt from https://www.mentalhealthfirstaid.org/about/research/, 2017.

INCREASE LITERACY AND COMFORT WITH BEHAVIORAL HEALTH BENEFITS

- Create awareness of what benefits exist to support employees and their families
- EAP as preventative behavioral health and work life support for the entire household
- Clear understanding and promotion of what Mental Health and Substance Use Disorder benefits are provided
- Clear understanding of how access to access information related to Behavioral Health benefits and Behavioral Health care providers, with a strong focus on confidentiality

- Encourage employees to work with Cigna
 Case Managers to improve benefit literacy,
 mental health literacy, types of care and
 treatment available, and finding high quality
 providers
- Educate employees on specialty behavioral programs available to them, and encourage engagement with Cigna





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Check out our Return to Work Toolkit:

https://bks-partners.com/coronavirus/

