

CALL TO ACTION

~a monthly public policy newsletter from the Mental Health Association in Michigan (MHAM)~

Vol. 5, No. 10

April 2008

Synopses of Several Recent Studies/Reports

~One in four Americans who lack health care coverage are eligible for but not enrolled in public insurance programs, according to a report from the National Institute for Health Care Management Foundation. Approximately 12 million people (half of whom are children) could access Medicaid or the State Children's Health Insurance Program, but do not. Among the reasons for non-enrollment are: lack of awareness that programs exist; lack of knowledge about how to enroll; fear of being linked with a publicly financed program; and difficulty maintaining enrollment.

~Updating previous work by the National Academy of Sciences' Institute of Medicine, The Urban Institute estimates that a lack of health care coverage contributed to 22,000 U.S. deaths in 2006 among persons age 25-64. Expanding on this, Families USA has prepared estimates for each state. Its figure for Michigan in 2006 is 650 deaths. Families USA further reports that, between 2000 and 2006, the estimated number of adults age 25-64 in Michigan who died because they did not have health insurance was more than 4,200.

~New Orleans residents who lost their homes to Hurricane Katrina were over five times more likely to experience serious psychological distress a year after the disaster than those whose homes weren't lost. This is among findings from a study presented at the annual meeting of the Population Association of America. The study was conducted by University of Michigan and Tulane University researchers, in conjunction with RAND Corporation, and examined mental health status in the fall of 2006 of pre-Katrina residents of New Orleans.

~In a British study by Depression Alliance, a third of people with clinical depression said they had been turned down for jobs because of their mental health problems. Seventy-one percent of depressed workers said they feared that disclosing their condition to colleagues would have a detrimental effect on their careers. Forty-six percent of subjects said having a job helped them recover. On the flip side, however, 51% felt they had been discouraged from taking on certain projects; 48% felt avoidance from their colleagues; 47% believed they had experienced snide comments from co-workers; and 50% believed they had been passed over for promotions. Only a quarter of the study subjects had informed their personnel departments of their condition.

~Roughly one in every five U.S. troops who have served in Iran and Afghanistan suffers from major depression or post-traumatic stress disorder, according to a RAND Corporation study. Another 19% may have suffered head injuries, with the majority of these severe enough to be categorized as traumatic brain injury. Only about half of those with mental health conditions (and a lesser percentage of those with head injuries) have seen a doctor. The top five barriers to seeking mental health care were: medication has too many side effects; possible career harm; possible security clearance denial; family and friends would be more helpful; and co-worker loss of confidence.

~Hospitals may be discharging persons with schizophrenia too quickly, according to data published by the Canadian Institute for Health Information. Nearly 40% of schizophrenia patients discharged from a general hospital in Canada were readmitted through emergency departments for a mental illness within one year of discharge. Twelve percent of the patients were readmitted within 30 days of discharge. The longer an individual stayed in a hospital initially, the less likely he or she was to be subsequently readmitted for any mental illness in the 12 months following discharge. Those with initial hospital stays of 1-2 weeks were 21% less likely to be readmitted within 30 days than those with initial stays of one-

week or less. Individuals with the longest initial stays (seven weeks or more) were 49% less likely to be readmitted within 30 days than the one week-or-less group.

~According to the Department of Community Health's 2007 Survey of Physicians, 41% of active physicians in Michigan plan to retire from the practice of medicine within 10 years (compared to 38% in 2005). Sixty-one percent of physicians providing patient care in Michigan reported their practice was full or nearly full (compared to 42% in 2005). About 36% of active physicians were primary care doctors. About 73% of physicians were accepting new Medicaid patients, but half of these physicians were spending 15% or less of their time with those patients. More than half of active physicians were involved in teaching, and 21% were involved in research, impacting the amount of time available for seeing patients.

~The Institute of Medicine reports looming problems in dealing with the "baby boomer" population as it nears age 65. The Institute says there aren't enough specialists in geriatric medicine to meet demand; the specialists that are available are underpaid; geriatric care training of providers and informal caregivers must be upgraded; and Medicare as currently structured and operated is a hindrance to quality care provision for older adults.

~A study published online by *Health Affairs* found that a Medicaid drug prior authorization program formerly used by the state of Maine disrupted antipsychotic treatment for individuals experiencing schizophrenia, with minimal or no cost savings resulting. Harvard researchers compared Maine Medicaid beneficiaries experiencing schizophrenia to similar beneficiaries in New Hampshire, where there was no prior authorization regulation.

New Mental Health Director at Michigan DCH

Congratulations to Mike Head, who assumed leadership last month of the Department of Community Health's Mental Health and Substance Abuse Division. Mike had most recently been director of the department's Office of Long-Term Care Services and Supports. Mike has extensive experience in mental health, including past direction of two Community Mental Health Services Programs. We wish Mike the best and look forward to working with him. We also extend our best wishes in all future endeavors to Mike's predecessor, Patrick Barrie.

U.S. House Blocks New Medicaid Rules

The U.S. House has voted overwhelmingly to block Medicaid rules that would change access to rehabilitative, case management and other services. As of April 26, the U.S. Senate had not taken its vote. If the Senate agrees with the House, President Bush has threatened a veto. The new regulations, if they took effect, would cost states billions of dollars. In Michigan, lost federal money over a five-year period could total \$4 billion. Families USA projects that, in the first year of the new rules, Michigan could also lose \$1.5 billion in business activity, \$572 million in wages and 15,300 jobs.

Call to Action is published monthly by MHAM. The primary mode of distributing the newsletter is electronic mail, but we will postal-mail copies to persons lacking Internet access. If you've come across this issue through a friend or colleague and wish to subscribe (there is no charge), kindly let us know. If at any point you wish to unsubscribe, simply contact our office.

Mental Health Association in Michigan

Mark Reinstein, Ph.D., President & CEO~Linda Hryhorczuk, M.D., Board Chair
30233 Southfield Rd., Ste. 220, Southfield MI 48076~Phone: 248/647-1711~Fax: 248/647-1732
e-mail: info@mha-mi.org ~ web: www.mha-mi.org (Frank Andreae, Webmaster)

A United Way-Supported Agency