

## **Certified Mental Health Assistant**

Chair Cirino, Vice Chair Rulli, Ranking Member Ingram, and Members of the Workforce and Higher Education Committee. Thank you for allowing me to speak with you today. I am Dr Randon S Welton M.D. and I am the Margaret Clark Morgan Professor and Chair of Psychiatry at the Northeast Ohio Medical University and I am here speaking in support of S.B. 60.

### **The National Shortage of Psychiatrists**

- According to the Health Resources and Services Administration (HRSA) in 2020 the United States had 38,600 psychiatrists which was approximately 87% of what was needed. Because of an increasing demand for psychiatric services and an aging population of psychiatrists, by 2035 the US will have only 70% of the psychiatrists it needs. There will be a national gap of approximately 14,000 psychiatrists.
  - o <https://data.hrsa.gov/topics/health-workforce/workforce-projections>

### **The Shortage in Ohio**

- The situation is worse in Ohio. Between 2016 and 2030 Ohio is projected to lose over 300 psychiatrists leaving us with only 1060 psychiatrists when approximately 2020 are required to meet the mental health needs of Ohioans. We will have only 52% of the psychiatrists we need.
  - o <https://bhw.hrsa.gov/sites/default/files/bureau-health-workforce/data-research/state-level-estimates-report-2018.pdf>
- To further worsen the situation we can expect a slight decrease in Psychiatric Nurse Practitioners and Psychiatric Physicians Assistants in the state of Ohio by 2030.
- HRSA calculates Health Professional Shortage Areas based on availability of care in geographic regions (e.g. counties), facilities (e.g. state prisons), or specific populations (e.g. immigrant)
  - Ohio has 135 Mental Health Professional Shortage Areas. That is the 15<sup>th</sup> worst in the nation

- Part or all of 43 Ohio counties are currently in a Mental Health Professional Shortage Areas impacting 4.9 million Ohioans
  - o <https://data.hrsa.gov/topics/health-workforce/shortage-areas>

### Impact

- There is a mental health crisis in Ohio
- Currently only 73% of Ohioans are satisfied with their access to mental health care and the quality of mental health care they receive. That is compared to national satisfaction rates of 90%.
- That will likely get worse as fewer Ohioans will be able to access psychiatrists. – (2020 SAMHSA Uniform Reporting System)
- The shortage of providers is straining the system. The Ohio Council of Behavioral Health & Family Services Providers surveyed community mental health agencies in 2021. They found that
  - o 98% were having difficulty finding new clinical and medical staff
  - o 88 % had difficulty retaining staff
  - o 77% worsening turnover in medical and clinical staff
  - o 91% had positions open for more than 45 days
- There is a mental health crisis in Ohio, and it will be getting worse

### Solutions

- Train more psychiatrists
  - o Psychiatry residency takes 4 years after medical school with a conservative cost of \$90,000 per resident per year
  - o Psychiatrists are free to leave the state after completing training
- Train more Psychiatric Nurse Practitioners and Psychiatric Physician Assistants
  - o Training a Psychiatric Nurse Practitioner or Psychiatric Physician Assistants is quicker and less expensive than training a Psychiatrist, but fewer than 5% of Physician Assistants go into mental health and Nurse Practitioners often want to move to states where they have more independence than they do in Ohio

- In 2016 there were a total 420 Psychiatric Nurse Practitioners and Psychiatric Physician Assistants. By 2030 we will need 600 and that does nothing to close the gap of almost 1000 psychiatrists we will have by then.
- Increase Mental Health Integration into Primary Care
  - Primary Care Providers already provide a significant portion of mental health care, but HRSA is predicting that Ohio will have a 13% shortage of Family Medicine physicians by 2030.
- Rely on Telepsychiatry
  - Telehealth options improve access to providers and can redistribute mental health assets, but it does not add hours to the day or reliably increase the number of psychiatrists working in Ohio.

### The Result

- Too many Ohioans get
  - Inadequate mental health care
  - Mental health care in prison, or
  - No mental health care

### Part of the Solution – Create Certified Mental Health Assistants

- Training Certified Mental Health Assistant
  - The CMHA training will take someone with a Bachelor’s Degree and provide two years of intensive didactic and clinical training focused solely on mental illness and substance use disorders
  - In comparison Physician Assistant training takes 24-27 months after obtaining a Bachelor’s Degree and covers all aspects of medicine often receiving only a couple months of training in mental illness.
- Distinctives about the training
  - During CMHA training there will be an intense focus on clinical reasoning skills and the conduct of evidence-based practice and practice-based learning. The training will, from the very beginning, attempt to emulate clinical practice. There will be an

emphasis on clinical vignettes, standardized patients, and realistic clinical scenarios.

- CMHA students will be trained in a variety of health care systems alongside medical students, psychiatry residents, and pharmacy students ensuring an interdisciplinary approach to mental health care.
- While we have worked at designing the program at the Northeast Ohio Medical University, once the program is successful we believe several other Universities are prepared to create their own programs, rapidly expanding the number of trained mental health providers.

- Safety Concerns

- What we have proposed is that CMHAs will work exclusively under the supervision of a physician. The physician will be required to make the original diagnosis and to meet with the CMHA weekly (or more frequently as needed) to discuss the care they are providing
- We are recommending that CMHAs have limitations on their prescribing privileges.
  - They will not be allowed stimulants except for patients with physician documented Attention Deficit Hyperactivity Disorder.
  - They will not be allowed to prescribe opiates except for buprenorphine for the management of opioid use disorder
  - They will not be allowed to prescribe benzodiazepines except for conditions with an FDA indication.
  - They will not be allowed to prescribe ketamine or psychedelic medications.
  - They will not be allowed to provide electroconvulsive therapy or transcranial magnetic stimulation

- CMHA in clinical settings

- As CMHA graduates will be unable to practice independently they will function as true physician extenders.
- CMHA graduates will fit naturally into inpatient psychiatric units, outpatient mental health clinics, pediatric practices, and primary

care clinics. In mental health arenas they will be extensions of the psychiatrists. In primary care and pediatric offices, they can supplement the expertise of the existing physicians.

- As CMHAs will only be licensed in Ohio the folks we train here will practice here

- Conclusion

- The Certified Mental Health Assistant is an innovative approach to enhancing the quality and quantity of mental health care received by Ohioans. It will provide Ohio a distinct advantage in meeting the mental health crisis. It will provide care that is safe, effective, and affordable. It may not be the only step we can and should take to solve the mental health crisis in Ohio, but we believe it is a very effective first step.

- Chairman Cirino and members of the committee, thank you for allowing me to testify.