

## **PRESS RELEASE**

*Contact Meena Dayak at [MeenaD@thenationalcouncil.org](mailto:MeenaD@thenationalcouncil.org) or 202.684.7457, ext. 228*

### **HIT Funding Fails to Address Mental Illnesses and Addiction Disorders**

#### ***New survey shows wide HIT gap between general and psychiatric healthcare***

**Washington DC, June 29, 2009**— Mental health and human services lag far behind general healthcare in access to health information technology (HIT), according to a national survey of nearly 500 organizations. Lack of financing is the primary barrier to the widespread adoption of HIT.

The 2009 Behavioral Health/Human Services Information Systems Survey was conducted under the direction of the Mental Health Corporations of America, National Association of Psychiatric Health Systems, National Council for Community Behavioral Healthcare, and the Software and Technology Vendors Association. The survey highlights the lack of resources for behavioral health organizations to quickly expand information systems.

Although adoption of information technologies, including electronic health records, might be our nation's only hope for meeting the increasing demand for mental health and addiction services, little to none of the billions the federal government plans to spend on HIT will go to the human services sector.

“Health information technologies can help serve more patients more effectively and better meet the growing need for psychiatric services,” said Mark Covall, president and CEO of the National Association of Psychiatric Health Systems, in response to the survey findings. “The significant investment that has already been made by providers is evidence of the field's commitment to technology. But we can't keep up unless dollars are available on par with the rest of healthcare,” he added.

The survey revealed that mental health/addictions services spend only half as much as primary care on HIT and employ only about a third as many IT professionals as primary care. Fewer than half of all behavioral health and human services providers have fully implemented clinical electronic record systems. Most of these providers expect to spend even less on HIT next year on account of budget cuts, reduced reimbursements and higher patient volume. However, if resources were made available, overall HIT spending would increase, according to the survey.

The *Health Information Technology for Economic and Clinical Health Act* (HITECH), enacted as part of the *American Recovery and Reinvestment Act* (ARRA), creates Medicare and Medicaid reimbursement incentives to encourage a wide array of providers to adopt and utilize HIT. However, the public mental health and addictions services safety net is NOT eligible for this funding.

“Mental health and addiction services get short shrift yet again even as we confirm that HIT is the cornerstone of efforts to coordinate services among healthcare specialties,” said Linda Rosenberg, president and CEO of the National Council for Community Behavioral Healthcare. “Mental and addiction disorders are often chronic conditions, and HIT can coordinate care and save and

improve lives,” she said.

Don Hevey, CEO of the Mental Health Corporations of America, noted, “Information technology is a dynamic and evolving force in behavioral health and human services. If we can break down funding barriers, more providers will be able to realize the benefits of full system acquisition and implementation, and the impact of information technology on the efficiency and effectiveness of service delivery will increase significantly.”

“Continuous information sharing and contact with lawmakers by industry organizations and those we represent are critical to moving toward adequate funding and resources for behavioral health technology,” said Kevin Scalia, chair of the Software and Technology Vendors Association and executive vice president, corporate development, Netsmart Technologies. “The organizations that sponsored this survey are engaged in ongoing dialogue with legislators and policy makers on behalf of the millions who would benefit from quality care facilitated by HIT funding and advancements, and we encourage others to join us in this important effort.”

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### ***About the Survey***

*The Behavioral Health/Human Services Information Systems Survey was conducted by the Centerstone Research Institute on behalf of the Mental Health Corporations of America, National Association of Psychiatric Health Systems, National Council for Community Behavioral Healthcare, and Software and Technology Vendors Association. The online survey launched in January 2009 and included 26 questions related to the demographic characteristics of providers, utilization of information technology, IT expenditures, service delivery practices, and attitudinal factors. Survey responses were received from 440 organizations representing varied segments within the behavioral health and human services field. Aggregated survey responses for each question were reported by overall sample as well as eight organization types, including community behavioral health providers; hospitals or psychiatric units in general hospitals; residential facilities; state or county providers; private clinical group practices; substance abuse or addictions providers; managed care organizations; and others. An executive summary of the survey findings is available at [www.TheNationalCouncil.org](http://www.TheNationalCouncil.org) and at [www.naphs.org](http://www.naphs.org).*