MEDICINE

Possible IU Psychiatry Partnerships

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Problem

- Everyone in Indiana: We don't have enough psychiatrists and therapists to meet the demand.
- IU: We have the infrastructure to generate more psychiatrists and psychologists, but we don't have the funding needed to expand more than our current state.
- IN Employers: Our employees can't access behavioral health care as easily as they need to.

Background

- IN ranks in the bottom quintile in the US in terms of availability of psychiatrists (and psychiatry specialists like child and addiction psychiatrists) per capita.
- Residency slots are funded via CMS and haven't increased significantly in years.
- We may have even worse psychologist and master's level clinician availability/capita in IN.
- We can use funding of any sort (state, federal, philanthropic, etc.) to cover training costs (salary of the resident, education, administrative time).
- We have no need <u>at all</u> for more patients. (We have 900 inquiries per week and have capacity for about 4 new patients). This is not about us trying to get more patients!
- Our residents and psychology trainees work in clinical settings directly with 1:1 IU School of Medicine faculty supervision. Faculty bill for patient encounters. They conduct psychiatric/psychological assessments, prescribe medications, and deliver evidence-based psychotherapy.

Possible Solution: Preliminary Idea

- Could employers cover the costs of a resident/intern trainee in order to guarantee access to faculty/resident outpatient psychiatry treatment slots?
- Virtual Care makes this feasible
- Recent State funding has allowed us to develop experience with relevant contracts/arrangements
- Example: Employer X funds one resident slot (x 4 years). This creates 4 hours of access each week to a variety assessment and treatment services at IUSM/IUH for families employed by Employer X who are located in Indiana (which would otherwise be impossible to access).