Hennepin **Healthcare**

MENTAL HEALTH ADULT DAY TREATMENT (ADT)

ADT is an intensive mental health service that provides skills training to support a person to live and function more independently in the community, by reducing the effects of symptoms associated with a mental illness. ADT is short-term, group therapy, outpatient and community-based, consisting of three-hour per day, multiple days per week sessions (maximum of 15 hours per week).

• ADT includes multidisciplinary treatments:

Group psychotherapy, rehabilitative interventions, education, living skills and crisis management are provided under the clinical supervision of a mental health professional.

- ADT prevents hospitalization: This offers cost savings, and allows participants to live at home, continue working, socializing, and receive family support, without the disruptions of inpatient care.
- ADT supports discharge from the hospital: These structured meetings offer support and skill building to support participants as they transition to life in the community.

Request

- HF 4307 / SF 4013: Rate increase for Adult Day Treatment: \$261,000 in FY 2023, and \$1.35M in FY 2024 (included in the Governor's budget proposal).
- HF 3215 / SF 3884: Workforce Relief Community Mental Health Grants: Provides grants from the American Rescue Plan to support mental health providers to address workforce challenges.

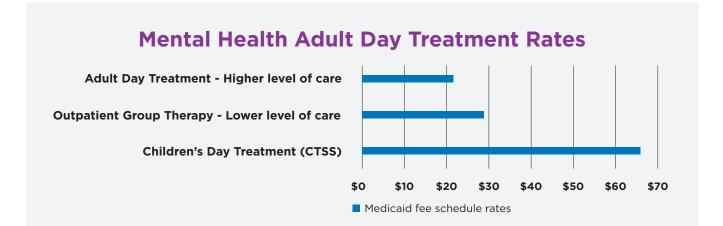
The problem

ADT services are at risk of closure due to historically low reimbursement rates compounded by limitations on group therapy during Covid and lack of mental health parity.

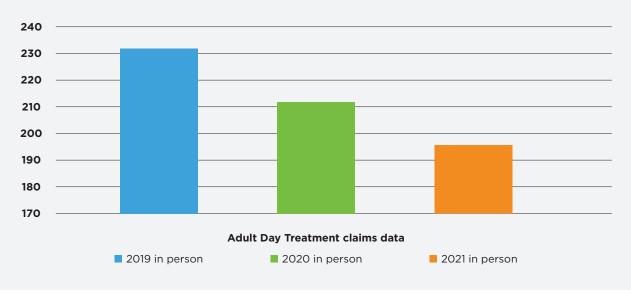
- ADT rates have been the same since 2004 and are a third of Children's Day Treatment rates. The soonest a rate increase could result from the current DHS mental health rate study is 2025, this is too long to wait for this critical service.
- ADT is designed as a group process. Covid has made meeting in groups unsafe, and virtual meeting has not been as effective for patients, leading to lower enrollment. In-person meetings still occur, but the number of patients who are able to meet together has been limited due to the need to social distance.
- ADT's lower enrollment and low rates have made keeping mental health staff more difficult as we compete for providers who offer more profitable services and salaries, and rehiring for a program that is in limbo is not an option.

The problem continued

- ADT is a higher level of care than other outpatient treatment programs. The programming requires more work from staff due to the increased acuity, case management needs, safety planning and more thorough discharge planning. However, reimbursements for this more intensive service are comparably lower.
- ADT commercial coverage is declining, as commercial payers move toward the Intensive Outpatient (IOP) model, and IOPs are not paid by Medicaid.
- As commercial payers move toward the IOP, fewer are covering the ADT. The result is a significant disparity between those on public assistance and people who have commercial insurance, reducing access to this care for people on Medicaid. The loss of ADT is becoming an issue of equity in our communities.



Mental Health Adult Day Treatment enrollment changes for one program



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