



1. KNOW THE IMPACT

Understanding the impact of mental illness in the workplace in terms of MHPAEA compliance and healthcare costs is an essential first step. However, be sure to recognize the co-occurrence of mental health with chronic conditions like diabetes and heart disease, absenteeism, and lost productivity.

Employers should work with consultants, health plans, administrators, and other vendors to assess risk, determine gaps in care, and set forth a business case that brings attention to mental health issues and appropriately invests in a comprehensive approach. For example:

- ▶ **Use calculators** and other tools to estimate the prevalence of mental health disorders, the bottom line cost, and the potential savings from implementing interventions.

- ▶ **Examine the use of mental health/substance use (MH/SU)** benefits, pharmacy spend, and short- and long-term disability claims. Does your data reflect the national trend showing one in five suffering from a mental health condition? At what cost to your organization? Are employees using available resources to get the care they need?
- ▶ **Pay particular attention to mental health parity requirements.** MHPAEA violations can result in a breach of fiduciary responsibility under ERISA and an IRS excise tax of \$100 per covered individual per day. ERISA law holds the plan sponsor accountable for violations.

“Mental health is among the most stigmatized of categories. People are ashamed of being mentally ill. They fear disclosing their condition to their friends and confidants — and certainly to their employers.”

— Elyn R. Saks

Mental Health Law Expert

2. BREAK THE SILENCE

Stigma is part of the reason that, culturally, we don’t achieve parity. We don’t hesitate to discuss care and treatment for cancer, diabetes, heart disease or other physical conditions, but mental health stigma — remains stubbornly pervasive.

Employers have a powerful opportunity to break the silence that surrounds mental illness. For example:

- ▶ **Use “reduce stigma” messaging** in employee communication strategies, train supervisors and managers to recognize and address mental health issues and take accelerated action to revise company programs and policies (e.g., offering sufficient and mandatory vacation time, improving return-to-work/accommodations practices).
- ▶ **Collaborate with EAP vendors** to increase use of their services and connect awareness and educational efforts to action. With only three to five percent of employees currently accessing EAPs, this is a relatively untapped resource that can make important contributions to eliminating stigma and improving prevention, early intervention, and appropriate treatment.



1 IN 5

Adults in the U.S. experience mental illness in a given year.

only

41%

received mental health services.

Because most employees are not seeking treatment, employers are losing an estimated

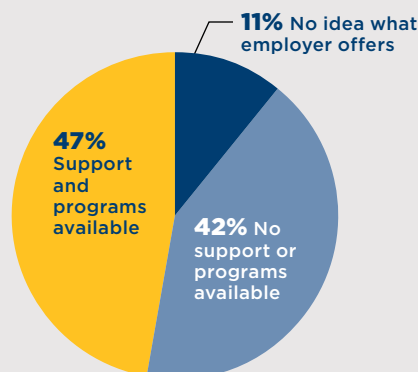
\$225.8

billion annually each year due to stress, anxiety, depression and substance use disorder.

LEARN MORE:
World Health Organization:
[Mental Health in the Workplace](#)

MENTAL HEALTH AWARENESS

More than half of employees say they don’t know if their company offers mental well-being programs or that no support is available.



Source: Workplace Options

DISPELLING MYTHS: One Way to Address Stigma

MYTH: People are “faking it” or doing it for attention.

FACT: No one would choose to have a mental illness, just as no one would choose to have a physical illness. The causes for mental health conditions are intensively studied and they are real.

LEARN MORE: [Dispelling Myths on Mental Illness](#)

- ▶ **Play offense** by making mental health screening tools available to help employees determine whether they are experiencing symptoms of a mental health condition. Investigate innovative evidence-based educational resources such as [Bring Change to Mind](#), [Stamp Out Stigma](#), [#IWILLLISTEN](#), and [Right Direction](#) to open conversations about mental health.

3. ENSURE PARITY AND AFFORDABLE ACCESS

Despite the law, mental health parity is a long way from becoming a reality in the U.S. The findings of a 2017 national study by [Milliman](#) raised eyebrows — and awareness. The comprehensive analysis revealed troubling disparities between reimbursement rates and in- and out-of-network care for medical primary care versus behavioral health.

Results of the National Alliance’s first “Deep Dive” Module of eValue8, which assesses health plan processes and performance on mental health, revealed similar trends. It summarizes the assessment responses of eight vendors and offers specific recommendations for employers to encourage continuous improvement and to take action in collaboration with their trusted vendors. Employers — especially when they unite and raise their voices together — can, for example:

- ▶ **Set expectations for health plans,** administrators and other vendors to reduce disparities and improve access and outcomes for mental health services to ensure mental health parity. This could include recommending restructuring that would support a [Collaborative Care Model](#); that helps providers practice “at the top of their license” to address capacity challenges, as well as investigating innovative supplemental solutions like telehealth, digital health, pharmacogenomics, and second opinion services.
- ▶ **Do not assume** insurers or plan administrators are in compliance with parity. Secure an independent plan design review by a third party with expertise in mental health parity requirements. Employers may also want to seek indemnification from their vendor(s) for certain risks associated with parity non-compliance. ([Model Hold-Harmless Language](#))
- ▶ **Review in- and out-of-network use and payment,** and denial rates for behavioral health versus medical/surgical services. ([Model Data Request Form](#)).

“It [the Milliman report] was a wake-up call for employers, regulators and the plans themselves that whatever they’re doing, they’re making it difficult for consumers to get treatment for all these (mental) illnesses. They’re failing miserably.”

— Henry Harbin, Former CEO of Magellan Health, Advancing Integrated Mental Health Solutions (AIMS Center) Advisor

LEARN MORE: [AIMS Center: Improving the health of populations by advancing effective, integrated behavioral healthcare](#)



“I see a future where everyone who needs mental health care gets it. We must end the separate and unequal treatment of mental health and addiction and ensure each of us is able to achieve a full and meaningful life.”

— Patrick Kennedy, Former Congressman (D-RI); Founder, The Kennedy Forum; Co-Founder, One Mind; Commissioner, President’s Commission on Combating Drug Addiction and the Opioid Crisis



4. BUILD A CULTURE OF WELLBEING

In the last two years, the National Alliance launched their Wellbeing Initiative with a mission to be a recognized, leading voice advocating for and demonstrably improving the wellbeing of individuals and their families through and to the benefit of employers, communities and healthcare delivery. Their premise is that when employees feel highly valued and well supported, they are better able to bring their best life to work and their best work to life.

A growing number of U.S. employers are shifting their focus from wellness programs to a wellbeing approach. This includes a more comprehensive mindset that tackles elements like emotional and mental health, productivity, social connectivity, financial education, and job fulfillment, among other things. What can employers do to include mental health in their wellbeing initiative?

- ▶ **Develop a multi-year, multi-pronged strategy that will focus on better overall health, engagement and savings.** A sound business and employee communications strategy will lead to more employees and covered family members getting the care they need to prevent and treat mental health conditions and support caregivers and

When an employer fosters a culture of wellbeing, it moves away from relying on traditional wellness programs like biometric screenings and embraces a holistic approach that includes emotional and mental health.

LEARN MORE: [Working Well: Leading a Mentally Healthy Business](#)

others who are dealing with related conditions.

- ▶ **Assess how a culture of wellbeing will measurably reduce risk across the bottom line.** Collecting data on population health, demographics, risks, and utilization of benefits is a first step.
- ▶ **Develop a plan that uses technology to support easy navigation to qualified mental health providers.** From apps that provide a lifeline to teenagers facing depression or bullying, to meditation and mindfulness, to screening for certain conditions, mental health resources are a practical way to efficiently and effectively guide employees to the plentiful options that enhance resiliency and wellbeing.

“Employees who believe that management is concerned about them as a whole person — Not just an employee — are more productive, more satisfied, more fulfilled. Satisfied employees mean satisfied customers, which leads to profitability.”

— Anne M. Mulcahy, Former Chairperson and CEO of Xerox Corporation

DID YOU KNOW?

Smoking Cessation Could Improve Mental Health

People with mental or substance use disorders or both are more than twice as likely to smoke cigarettes as people without such disorders. They are also more likely to die from smoking-related illness than from their behavioral health conditions. Many are motivated to quit smoking, although they may require more intensive treatment.

- Smoking cessation reduces smoking-related disease risk and could improve mental health and drug and alcohol recovery outcomes.
- Recent research suggests that smoking cessation may be associated with reduced depression, anxiety, stress, and improved positive mood and quality of life compared to smoking.
- Some research suggests that the effect size may be equivalent to or greater than anti-depressant treatment.

Employers can influence change by offering low-or no-cost smoking cessation treatment benefits, and by ensuring that behavioral covered health treatment facilities include proven tobacco cessation interventions.

CASE STUDIES:

REAL COMPANIES MAKING A REAL DIFFERENCE

Case studies are an important way for employers to learn from one another. Following are a few examples. The American Psychiatric Association's [Center for Workplace Mental Health](#) features many more.

▶ **EY: Tackling stigma and promoting mental health for employees to create a culture of caring:** EY developed “r u ok?” to end the stigma that surrounds mental health while connecting employees to existing company resources. The program incorporates employee champions, peer-to-peer connections, and follow-up services. Within the first three months, there was a 30.2 percent increase in calls to the EY Assist line pertaining to mental health. Additionally, as of 2017, the r u ok? program generated more than 49,000 touchpoints among U.S. employees,

including more than 23,000 articles read; 21,000 website hits; 1,000+ events attended, 781 e-learning completed, and more than 1,000 EY Assist consults. “Mental health is complex, offering your support needn't be.”

▶ **American Express: Embracing a culture of mental health.** [American Express](#) is providing “the next generation of health for its employees.” This means looking at physical and emotional health holistically, which has led to a decrease in the incidence of medical and behavioral health claims. The company expanded the EAP to include face-to-face options, introduced a major strategy to destigmatize mental health conditions, gained the attention and buy-in of executive leaders and managers, and added a high-level manager who works solely on mental

health. American Express won the American Psychological Association's inaugural Organizational Excellence Award for its efforts.

▶ **American Airlines: Integrated disability program keeps employees working well.**

When a data analysis showed that “mental nervous conditions” were a factor driving up healthcare costs at [American Airlines](#), company leaders took action. An interdisciplinary team of EAP specialists, case managers, and clinicians, including a psychiatrist, began reviewing claims monthly to ensure claimants were progressing through the healthcare system in a timely fashion. A strong commitment by the team — and by employees — has led to lower disability and “mental nervous” claims.

RESOURCES FOR EMPLOYERS:

- [The Behavioral Health Care Coverage Transparency Act of 2018](#)
- [Self-Compliance Tool for the Mental Health Parity and Addiction Equity Act](#)
- [\[Proposed\] FAQs About Mental Health and Substance Use Disorder Parity Implementation and the 21st Century Cures Act](#)
- [Job Accommodation Network](#)
- [Mental Health First Aid at Work](#)
- [Out-of-Network, Out-of-Pocket, Out-of-Options: The Unfulfilled Promise of Parity](#)
- [Model Hold-Harmless Language](#)
- [Model Data Request Form](#)
- [PsyberGuide \(a Project of One Mind\)](#)

RESOURCES FOR EMPLOYEES:

- [Parity of Mental Health and Substance Use Benefits with Other Benefits: Using Your Employer-Sponsored Health Plan to Cover Services](#)
- [Right Direction](#)
- [Stamp Out Stigma](#)
- [#IWillListen](#)
- [In Our Own Voice](#)
- [Bring Change to Mind](#)



National Alliance acknowledges support from Herman Family Foundation and Mental Health Association of Maryland by way of funding to produce this Action Brief.