

Centene Advanced Behavioral Health

White Paper

Payers as Partners in Suicide Prevention



Suicide is a highly prevalent – yet preventable – cause of death. In the United States, approximately 130 Americans end their lives each day – one death every 11 minutes¹ – making it one of the top 10 causes of death. To put that number in perspective, there are two and a half more deaths by suicide in the United States than from homicide.² The number of suicides has not decreased over time. In fact, suicide rates grew 33% between 1999 and 2019.³ The recent and current state of our world has the potential to fuel further increases.

History has shown that previous pandemics resulted in elevated suicide rates,⁴ and although the public health impact of COVID-19 has yet to be fully understood, multiple factors related to increased suicide risks such as economic stressors, depression, and social isolation have been widely reported. Adding to the societal and individual impact of the nearly 50,000 deaths that occurred in 2019, “12 million American adults seriously thought about suicide, 3.5 million planned a suicide attempt, and 1.4 million attempted suicide.”⁵

Suicide affects all racial, ethnic, and socioeconomic groups, but certain individuals are at higher risk for this tragic, avoidable event. Although females attempt suicide three times more often and are more likely to exhibit suicidal thoughts than males, male suicide is four times higher.⁶ Suicide rates in our country are also higher among Whites, Native Americans, and Alaska Natives,⁷ as well as within rural communities.⁸ Although historically lower, suicide rates among African-Americans have increased over the years, particularly among youth, which was further exacerbated by the COVID-19 pandemic.^{9,10} While suicide can occur at any age or stage of life, it is the “second leading cause of death for people ages 10 to 34 years.”¹¹

In addition to the loss of life and impacts on family, friends and community members, the substantial financial costs associated with suicide also create an economic burden on society. Annually, suicide and suicide attempts equate to more than \$70 billion in lifetime medical and work-loss costs.¹²

Payers have a significant opportunity and responsibility to lead efforts in reducing suicide and attempts. Supporting healthcare providers, employing skilled clinicians, utilizing data to identify those at risk, and engaging individuals in their recovery through best practice interventions can save lives. As one of the largest Managed Care Organizations in the country serving some of the most vulnerable individuals, Centene is dedicated to strengthening access to suicide care, partnering with providers in the delivery of care, and harnessing the power of innovative technology to help individuals live their lives to their fullest. The following are recommendations in this pursuit.



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Recommendations

HEALTHCARE TEAM SUPPORT AND TRAINING

Suicide is associated with several risk factors and variables contributing to a person's level of distress. Therefore, it is imperative to bolster providers with training and tools that address physical, mental, socio-economic, and other influencers. Data shows that more than 80% of individuals see a behavioral health or primary care provider (PCP) within a year before their death,¹³ and almost 50% of individuals who die by suicide have seen their PCP in the prior 30 days.¹⁴ Yet in a survey conducted by the Association of Clinicians for the Underserved (ACU), "one in five providers had never received training on how to recognize warning signs that patients may be at elevated risk for suicide, and 32% lacked confidence in their ability to provide treatment to patients with suicidal thoughts or behaviors."¹⁵

Payers have access to substantial amounts of data and can therefore conduct analytics to identify those at highest risk of suicide and related factors. These analyses can inform the care delivery system by supporting the learning and development needs of providers and stakeholders. As providers fortify their knowledge and confidence through evidence-based practices, they are better able to identify individuals with higher risk of suicidality, intervene earlier, and provide needed referrals. Payers can leverage existing evidence-informed suicide screening and intervention tools and trainings such as the Substance Abuse and Mental Health Services Administration (SAMHSA) Suicide Safe App.¹⁶ Augmenting providers' clinical skills to respond to members most effectively can save more lives.

- » In 2020, Centene partnered with the Association of Clinicians for the Underserved (ACU) to develop and deliver a Suicide Safer Care curriculum to more than 1,700 participants in 16 states on suicide risk assessment and intervention. The suicide prevention in primary care hands-on strategies in evidence-based practices included use of standardized screening tools, as well as interventions designed to reduce access to lethal means and extend safety planning. Additionally, through Centene's support, ACU launched national webinars and expanded its provider-facing toolkit resource.

While providers are a critical part of the equation, payers also have the opportunity to bolster efforts through increased access to services such as 24/7 crisis lines and ensuring suicide prevention skills among case managers. For example, Centene Advanced Behavioral Health is establishing an enterprise-wide suicide prevention culture that is integral to its care management approach and serves to enhance the wellness of members' lives. The comprehensively trained staff use evidence-based practices to screen for suicide risk, develop member-driven safety planning, and monitor members' treatment progress to improve outcomes and prevent suicide.

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EARLY RISK IDENTIFICATION

By embracing innovative technology, payers can predict and stratify those at risk to help prevent suicide attempts and behaviors. Leveraging data and machine learning, payers can implement models that accurately identify individuals' risk levels in order to quickly and effectively intervene.

- » Born out of initial efforts to capture and trend suicide-related claims, Centene Advanced Behavioral Health formed a workgroup collaboration of data scientists, business intelligence, health care analytics, and program development, to design an innovative predictive analytical model to identify members with the highest potential risk of suicide prior to an attempt as part of its suicide prevention program Choose Tomorrow™.
- » This proprietary Risk Model Data Source examines historical member data to create an individual risk profile in real time based on multifaceted elements present in members with suicide-related claims including relevant demographics, population health categories, previous diagnosis flags, and relative prescription information. The parameters were developed by a team of clinical experts and data scientists based on current research in suicidology, behavioral health, social determinants of health, and data science. The resulting reporting influences care management outreach for early screening, support, referral, access to resources, and provider engagement.

In addition to the loss of human life and the emotional suffering of loved ones, suicide also creates staggering economic costs, which has been reported as more than \$1.3 million per suicide.¹⁷ At Centene, when reviewing data, it was found that the highest spend for suicide-related claims was emergency room care and inpatient hospitalization. These findings were factored into Choose Tomorrow, which not only aims to reduce avoidable loss of human life for families and communities, but also to decrease inpatient admissions, avoidable ER visits, and total medical and behavioral health costs by proactively engaging those at risk.

ENGAGEMENT AND INTERVENTION

For those who have attempted suicide, the time directly following discharge from inpatient or emergency treatment increases the possibility of another attempt; however, when timely clinical interventions ensue, that likelihood is significantly reduced.¹⁸ Research shows that by providing follow-up care and support, suicides across the country could be decreased by 20%.¹⁹ To better engage recent suicide survivors in treatment, the CDC recommends use of varied modalities of outreach.²⁰

- » Centene Advanced Behavioral Health's multi-modal program tailors individual outreach, assessment and interventions, which can vary from education and digital/telephonic therapies to higher levels of care management. This allows the clinical team to tailor care for the individual, employ evidenced-based approaches to risk prevention delivered with compassion and respect, and ensure connections are made more easily to community resources.



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- » Based on Zero Suicide’s Caring Contacts, Choose Tomorrow also employs a postvention communications campaign during care transitions and after interaction with the care management team. Designed to continue the positive support received, further encourage connection to treatment, exude a sense of hope, and lessen harms to prevent future risks, the communications can be tailored to best fit individuals.
- » After identification, an evidence-informed assessment tool, such as the Columbia-Suicide Severity Rating Scale (C-SSRS) can be used for further risk screening. As part of Choose Tomorrow, a proprietary safety planning tool, created based on research and vetted by behavioral health clinical experts, is utilized to help members establish a prioritized list of coping strategies and support resources.

Payer programs must be culturally sensitive and look to identify, then address, social determinants of health (SDoH). Social isolation, financial problems, job issues or loss, and other SDoH are known suicide risk factors.²¹ Centene’s care management team improves member engagement and treatment results by promoting connection to services and supports unique to the member to address the multiple aspects of their lives, including social determinant barriers, stigma, and access to care.

- » In 2004, the Centene Foundation for Quality Healthcare, a non-profit private foundation, was formed to improve the quality of healthcare for medically underserved individuals and families and economically distressed areas. Over the years, many of the Foundation’s funded projects have included an emphasis on addressing the various domains of SDoH. Through relationships with community-based organizations and health providers, projects that may aid in reducing suicide rates have been implemented such as addressing the role of stigma and geographic distance in rural communities as barriers to accessing mental health care; increasing access to mental health peer support for active military, veterans and their families; providing transitional housing with concurrent mental health care access and assistance with obtaining health and income benefits for ex-offenders; and providing access to healthy foods and nutritional guidance to families in rural food deserts.

As prevention programs are established, payers must also account for specific populations with a higher susceptibility, such as America’s youth. Statistics show that 1 in 100,000 children ages 10 to 14 and 7 in 100,000 teens ages 15 to 19 die by suicide each year.²² With increases in social isolation and reduced access to care, the COVID pandemic has exacerbated the problem. Reports show a more than 30% upswing in mental health–related emergency room visits for children ages 12 to 17 in 2020.²³ Additionally, adverse childhood events (ACE) such as violence, neglect, and substance use in the home can increase the likelihood of suicide or attempted suicide.²⁴ For those in the child welfare system, there is further increased risk. Children in foster care are almost three times more likely to contemplate suicide than their peers who have not been in foster care.²⁵

- » In partnership with the Zero Suicide Institute, Centene piloted the Zero Suicide Framework tailored specifically to children served in the state child welfare system in Washington State. Through appropriate screening and safety planning by behavioral and medical health plan staff, children are referred to behavioral health providers in their community for treatment in an effort to prevent suicide in this vulnerable population. Based on the success of the pilot project, Centene is expanding the Zero Suicide Framework to six additional states serving children and youth impacted by the child welfare system. Additionally, Centene Advanced Behavioral Health is implementing Choose Tomorrow, in partnership with Zero Suicide, in several pilot foster care markets.

Those who are or who have served in the United States Military and their families are another population that is disproportionately affected by suicide. A recent report published in June 2021 shows that since September 11, 2001, approximately 7,000 service members have died during military operations, yet more than 30,000 – four times that number – active duty personnel and veterans of post 9/11 wars have died by suicide.²⁶ While preventing unnecessary loss of life is imperative, supporting those left behind after a suicide is also critical. According to the Department of Veterans Affairs, each suicide affects approximately 135 others. Those close to an individual who dies by suicide can suffer a profound sense of loss, sorrow, or guilt – and experience suicidal thoughts or behaviors themselves. A study conducted by Clearinghouse for Military Family Readiness at Penn State, showed that spouses of Marines who died

by suicide compared to spouses of those who died in combat suffered more hardship and greater social stigma, leading to increased isolation, after the death.²⁷

- » Centene's support of suicide prevention also extends to its community partnerships. A five-year national partnership with Tragedy Assistance Program for Survivors (TAPS) was launched in 2019 to support suicide prevention and postvention outreach. TAPS has developed a successful model of care that provides comprehensive, peer-based support and programming to survivors of military suicide loss. Funding from Centene has allowed TAPS Suicide Prevention & Postvention to continue its world-class provisions of support to thousands of grieving suicide loss survivors.

FEDERAL & STATE POLICY RECOMMENDATIONS

Centene supports policy efforts aimed at improving access to and delivery of suicide prevention care, and equal coverage of mental health conditions. To successfully address the public health impact of suicide, it is essential to support recent public policy changes and continuing to pursue new opportunities. These include, but are not limited to, the following considerations.

- » Payers should continue to support the launch of the “988” three-digit direct line to the National Suicide Prevention hotline, which will shift how people experiencing a mental health crisis can access life-saving support. In the year before 988 becomes widely available, payers should continue to support use of well-trained crisis lines, mobile crisis for in-person response, and crisis stabilization programs for follow-up care. During the height of the COVID pandemic, Centene launched an expansion of the Crisis Text Line to provide free, text-based crisis support to healthcare workers on the front lines, as well as increasing support to peer-run “warmlines” call centers around the country to help them meet increased demand.
- » According to National Alliance on Mental Health (NAMI), “46% of people who died by suicide had a known mental health condition.”²⁸ This is one reason the Mental Health Parity and Addiction Equity Act (MHPAEA) is of utmost importance. MHPAEA requires payers to ensure medical and behavioral health services are provided equally, eliminating historical inequities that served as a barrier to those with mental health conditions from accessing necessary care. The spirit of MHPAEA ensures that benefit structures, and access of those benefits for behavioral health conditions, are on par with medical conditions – a step in the right direction in preventing suicide.
- » The Medicaid and CHIP Payment and Access Commission’s (MACPAC) June report included opportunities to implement enhanced mental health services. Centene supports Medicaid and the Children’s Health Insurance Program (CHIP) funding of real-time crisis response for beneficiaries and the implementation of benefits for children and adolescents with significant mental health conditions.
- » The American Rescue Plan Act of 2021 allocated funds for a number of key mental health services including addiction services, workforce education and training, suicide prevention, and public education campaigns. While this funding has the potential to lay the groundwork needed to begin to address



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the mental health epidemic gripping the country, continued financial support is required for the providers and community health centers by which a majority of these programs are delivered.

» According to the CDC, stabilizing housing can help decrease the risk of suicide.²⁹ As one way to address this social determinant of health (SDoH), payers can support expanded Home and Community Based Services (HCBS) benefits and access such as creating incentives for managed care plans or providers to develop partnerships with community-based organizations, social service agencies, counties, housing agencies, and public health agencies; building Medicaid housing partnerships; and building SDoH network partnerships. Additionally, payers can continue to support the Social Determinants Accelerator Act, which promotes cross-sector information exchange, furnishes grants in support of evidence-based health services, and forms a council focused on addressing social determinants of health.

Summary

Within the United States, suicide and suicide attempts result in significant, yet preventable, suffering for individuals, families and communities. Payers play a critical role in reducing these fatalities and attempts, and in turn, the associated avoidable distress. Through delivering improved access to high-quality individualized suicide care, partnering with providers, using advanced technology to better identify those at risk, and influencing important legislation, payers play a key role in decreasing this devastating emotional, as well as financial, burden to our society. Centene is proud to be a leader in helping those we serve experience full, fruitful lives, and remains steadfast in preventing unnecessary loss of life.

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