

KSKidsMAP

Pediatric Mental Health

KSKidsMAP is a statewide mental health care access program that supports physicians and clinicians' treatment of child and adolescent (ages 0-21) behavioral health concerns in primary care settings.

Pediatric Mental Health Care Needs in Kansas



More than 20% of Kansas youth experience mental disorders.



Youth and families experience long wait times to see mental health experts along with long drives to access specialty care. Waitlists to see a mental health specialist can be three months to one year.12



99 out of 105 Kansas counties are mental health professional shortage areas.3



Suicide is the second leading cause of death for Kansans aged 15-24.4



Kansas youth report experiencing depression and suicidal thoughts at a rate above the national average (42.9 and 36.7, respectively).3

How KSKidsMAP is Addressing These Needs

The mental health professional workforce shortage, especially child and adolescent psychiatrists, is impacting timely access to quality treatment. KSKidsMAP supports pediatric primary care practitioners in identifying and treating behavioral health concerns within their scope of practice. Through KSKidsMAP, children and adolescents have increased access to quality psychiatric treatment. which allows more youth to receive quality mental health care, closer to home, from their trusted primary care physician.

KSKidsMAP uses an interprofessional approach to move knowledge (not patients) and disseminates best practices. The KSKidsMAP Pediatric Mental Health Team includes:



Board-Certified Child and Adolescent **Psychiatrists**



Child and Adolescent Psychologists



Board-Certified Pediatrician



Social Worker with expertise in pediatric mental health

The three main program components are led by the KSKidsMAP Pediatric Mental Health Team: Consultation Line, ongoing TeleECHO Clinic, and Physician and Clinician Wellness. Through these activities, the KSKidsMAP Team equips physicians and clinicians with education, skills, and support to increase confidence and comfort in delivering evidence-based mental health care to youth in their clinical practice.

^{1.} Sullivan, K., George, P., & Horowitz, K. (2021). Addressing National Workforce Shortage by Funding Child Psychiatry Access Programs. Pediatrics, 147(1): e20194012. https:// doi.org/10.1542/peds.2019-4012 2. Steinman, KJ., Shoben, AB., Dembe, AE., Kelleher, KJ. (2015). How long do adolescents wait for psychiatry appointments? Community Mental Health Journal, 52(7): 782-789. 3. Kansas Communities that Care 4. https://www.kdheks.gov/phi/as/2018/2018_Annual_Summary.pdf. Depression/Suicide Supplementary Report. https://drive.google.com/file/d/14753Kq1TWARB-mkRihKGdQkawuF17nAU/view

Pediatric Mental Health Care Needs in Kansas

In the first two years of the program (July 2019-June 2021), 126 physicians and clinicians enrolled in KSKidsMAP serving patients in 62 of 105 Kansas counties (59%).



Physicians 77 (61.1%)



Nurse Practitioners 27 (21.4%)



Behavioral Health Clinicians 7 (5.6%)



Workers 7 (5.6%)



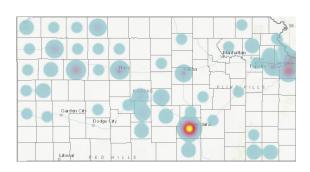
Physician Assistants 2 (1.6%)



Registered Nurses 3 (2.4%)



3 (2.4%)



On average, enrolled physicians and clinicians serve 1,727 youth and their families a year. About 20% of these youth (n=345) are likely to be experiencing a mental health disorder. With an annual operating cost of \$533,843, KSKidsMAP currently costs about \$12 per youth* who could benefit from KSKidsMAP support services. As more physicians and clinicians enroll in the program, the cost per youth will continue to decrease while their access to quality psychiatric care increases.

* Cost Calculation: 126 enrolled PCPs * (1,727 avg # youth served annually * 20% experiencing a mental health disorder) = 43,520 youth. \$533,843 annual program cost/43,520 youth experiencing a mental health disorder seen by enrolled PCPs = \$12.27 cost/youth

Recommendations*

The following recommendations promote policy, programs, and systems which support access to psychiatric care for Kansas vouth:

- Make pediatric primary care workforce development opportunities (e.g., training, technical assistance) widely available. These efforts will ensure gap-filling treatment services in mental health professional shortage areas are high-quality and follow best practice guidelines.
 - Fully fund a statewide child psychiatry access program (e.g., KSKidsMAP) to lead these activities. Current funding ends June 2023. (Recommendation was set forth by the 2021 Special Committee on Kansas Mental Health Modernization and Reform, 5.3).
 - Revise payment policies within managed care to ensure appropriate payments are available. Policies should apply to both direct mental health services in primary care and for physician-to-physician consultations.
- Fund initiatives that enhance the number of highly trained professionals practicing in Kansas, including child and adolescent psychiatrists and child psychologists.

Testimonials from Physicians



KSKidsMAP provides the extension of care of a pediatric medical home with the psychiatric expertise to provide the best mental health care to children under one roof.



KSKidsMAP fills a long-standing void in pediatric care as the prevalence of mental health is increasing with the changing social structure dynamics of modern times. The program helps to manage complicated [psychiatric illnesses and other mental and behavioral health problems] in children, since most pediatricians do not have the support of a mental health team in their realm of pediatric practice. During all these years in practice, we could not get the help

which is currently being provided by the team in KSKidsMAP.

For more information about KSKidsMAP, visit our website at wichita.kumc.edu/KSKidsMAP or contact the team by calling 1-800-332-6262 or emailing KSKidsMAP@kumc.edu.











^{*}See Impact Paper for detailed recommendations.