

General

1. Complete the following information below:

Name

Title

Company

Email Address

2. Indicate the size of your employee active population:

- less than 100
- between 101 - 500
- between 501 - 1000
- between 1,001 and 5,000
- between 5,001 - 10,000
- between 10,001 - 20,000
- over 20,000

3. Which coalition are you a member of?

4. Indicate the level of importance of mental health in your organization's health management strategy over the next two years:

- High importance
- Important
- Somewhat important
- Not important
- Don't know

5. Indicate your level of agreement with the following statement: "The mental health of our employees is directly linked to the overall performance of our organization"

- Strongly agree
- Agree
- Disagree
- Strongly Disagree

6. We have done internal assessments to connect mental health with the overall health and performance of our people

- Yes, currently in place
- No, will have this completed in the next 12-24 months
- No, not considering this
- Don't know

7. Does your company carve out their behavioral health?

- Yes, with no plans to change in the next 12-24 months
- Yes, but considering carving in in the next 12-24 months
- No, but considering to carving out the next 12-24 months
- No, with no plans to change in the next 12-24 months

8. How does your organization analyze the costs of mental health and/or substance abuse? (Check all that apply)

- Mental health claims
- Substance use claims
- Drug claims
- Medical claim offsets
- Productivity and performance offsets
- Impact on overall wellbeing
- We do not analyze these costs separately
- Don't know

Improving Access

9. Is your plan meeting the same network access standards for behavioral health as for medical?

- Yes, currently in place
- No, working towards this in the next 12-24 months
- No, not considering this
- Don't know

10. Indicate your level of agreement with the following statement: "Out-of-network use for behavioral health is comparable to medical/surgical services under the health plan"

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- Don't know

11. Have you or your health plan conducted an independent compliance assessment with mental health parity?

- Yes
- No
- Don't know

12. Do you have indemnification from your vendor for identified risks associated with mental health parity non-compliance?

- Yes
- No, but we will consider this in the next 12-24 months
- No, we have not considered this
- Don't know

13. Indicate which of the following actions your health plan or behavioral health organization have in place that address barriers to network participation:

	Yes, currently in place	No, working on this in the next 12-24 months	No, we are not considering this	Don't know
Equalize reimbursement rates for Mental Health/Substance Use Disorder (MH/SUD) specialist and medical surgical providers for similar services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Develop a mechanism to fast-track credentialing of MH/SUD specialists	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Assess prior-authorization policies to mitigate access hassle factors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Engage residents and clinicians not in-network	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

14. Indicate if your health plan/vendors have done the following:

	Yes, currently in place	No, will have in place next 12-24 months	No, we have not considered this	Don't know
Have turned on all four collaborative codes and promote them with no associated copay	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Provide technical assistance and training to medical providers to bill for the collaborative care codes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reimburse for transitional care codes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Provide quarterly reports on number of collaborative care claims received and reimbursed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Promote greater use of tele-behavioral health services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Provide a tele-behavioral health provider directory and/or clinician selection tool	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

15. Provide any comments on above

16. Indicate if your health plan/PBM has the following in place:

	Yes, currently in place	No, will have in place in the next 12-24 months	No, we are not considering this	Don't know
Comprehensive coverage for medications for treating substance abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pre-authorization policies for behavioral health medications	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Offers a value-based benefit design to mitigate both access and financial barriers to appropriate medication	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Measures first medication failure rates	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Provides comprehensive coverage of medications in the formulary adequate for diverse population needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Review coverage and utilization of personalized genomic tests and align with timely access strategies	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

17. Share learning, insights or outcomes of mental health programs or VBD strategies you've implemented

Improving Quality & Performance

18. Indicate if your health plan has the following in place:

	Yes, currently in place	No, will have in place next 12-24 months	No, we are not considering this	Don't know
Measure, report and improve performance on HEDIS measures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Require and monitor that clinicians screen for post-partum depression	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Include BH services and specialists in payment innovation models	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Monitor appropriateness of prescribing among primary care and behavioral health specialists for antidepressants, pain and ADHD	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Monitor for adherence to substance use medications	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Include a whole person health and wellbeing view when examining the opportunities and impact of programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Coordinate data and processes across vendors as appropriate	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reports to validate screening, identification rates and to assess progress	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reports on your employee population containing an integrated picture of behavioral health and medical conditions and risk factors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

19. Indicate the level of value your organization's Employee Assistance Program (EAP) provides your active population:

- Highly valuable
- Valuable
- Somewhat valuable
- Not valuable
- We don't have an EAP

20. Indicate what percentage of your active population utilizes your organization's EAP on an annual basis:

- 0 - 3%
- 4 - 6%
- 7 - 10%
- 10 - 15%
- 15 - 20%
- 20 - 25%
- Over 25%

21. What are your organization's top 2 reasons for EAP visits?

22. If you offer a PCMH or ACO, which of the following screenings do you require?

	Yes, currently in place	No, will have in place in the next 12-24 months	No, we are not considering this	Don't know
Depression	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bipolar	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Anxiety disorder	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Psychosis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Alcoholism	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Opiate addictions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Post-partum depression	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Don't know	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other (please specify)

Improving Environment

23. Rank the level of interest of the following activities for your organization (with #1 = most interest and #7= least interest):

☰	<input type="text"/>	Mitigate organizational stress
☰	<input type="text"/>	Promotes mental health as a portion of our <i>whole person</i> wellbeing
☰	<input type="text"/>	Company policies and practices focused on <i>whole person</i> wellbeing
☰	<input type="text"/>	Improve employee resiliency
☰	<input type="text"/>	Programs on mindfulness
☰	<input type="text"/>	Building emotional intelligence
☰	<input type="text"/>	Engage in community activities to reduce stigma

24. How is low emotional wellbeing and stress impacting your workforce? (check all that apply)

- More Absenteeism
- Suboptimal Performance at Work/Presenteeism
- Conflict at work
- Other (please specify)

25. There is a person in our organization who owns/leads *whole person* wellbeing

- Yes, already in place
- No, but considering this in the next 12-24 months
- Want to learn more about this
- Not considering
- If yes, indicate the title of this person below:

26. Does your organization offer training for HR representatives and/or supervisors that includes:

	Yes, currently in place	No, will have in place next 12-24 months	No, we are not considering this	Don't know
Recognizing the signs of behavioral health concerns in employees,	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How to respond appropriately to employees so they appropriately connect with services and supports	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

27. How can your coalition best support you in executing your company's mental health strategy?