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Employers, physicians must partner to meet nation's growing mental health needs

By Andrew Chomko and Robert Thompson

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"The Mental Health
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the Literature"
published in the
Journal of the
American Medical
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We all pay the price for a behavioral health system that doesn't work, and employees pick up most of the bill—employees receive health conditions and employees more than \$100 billion and 217 million lost workdays each year.

Long before the COVID-19 pandemic, the nation's behavioral healthcare system was in crisis, with mental health diagnoses on the rise, coupled with a shortage of providers. The pandemic took a system that was already broken and stressed it even further. Cases of

depression, anxiety and substance abuse [have risen as a result](#) and will

only be further exacerbated with the still-to-come surge. America's healthcare leaders must make behavioral health reform a top priority.

We all pay the price for a system that doesn't work, and employees pick up most of the bill—employees receive health conditions [and employees](#) more than \$100 billion and 217 million lost workdays each year. That's why cooperation between employers and healthcare stakeholders—especially primary-care providers—is essential to begin to solve the problem. When dialogue and collaboration happen, solutions can be found.

Our fragmented system makes it next to impossible for patients to know how to access appropriate mental health care, let alone receive a diagnosis. Health leaders must focus on finding ways to integrate behavioral health with primary care.

All too often, these questions about behavioral health concerns are not part of standard primary-care screenings. Primary-care physicians—such as family medicine physicians, internists, obstetricians/gynecologists—could start the patient on a new path simply by asking the right questions. Thus, if a mental health screen is identified, the physician can educate the patient and follow up with a care handoff to a behavioral health specialist.