

# Research-Policy-Practice Synergy to Support Louisiana’s Behavioral Health Workforce – Feasibility and Lessons Learned from the Capacity and Sustainability Funding Pilot

Lisa Staples, MPH<sup>1</sup>, Ronnie Rubin, PhD<sup>2</sup>, Gabrielle Gonzalez, MPH<sup>1</sup>, Brian Bumbarger, PhD<sup>3</sup>, Stephen Phillippi, PhD<sup>1</sup>  
<sup>1</sup>LSUHSC School of Public Health, <sup>2</sup>Impact Reach Consulting, <sup>3</sup>Science, Systems & Communities Consulting, LLC



Louisiana State University Health Sciences Center School of Public Health (LSUHSC School of Public Health) <https://sph.lsuhsoc.edu/service/center-for-evidence-to-practice/>

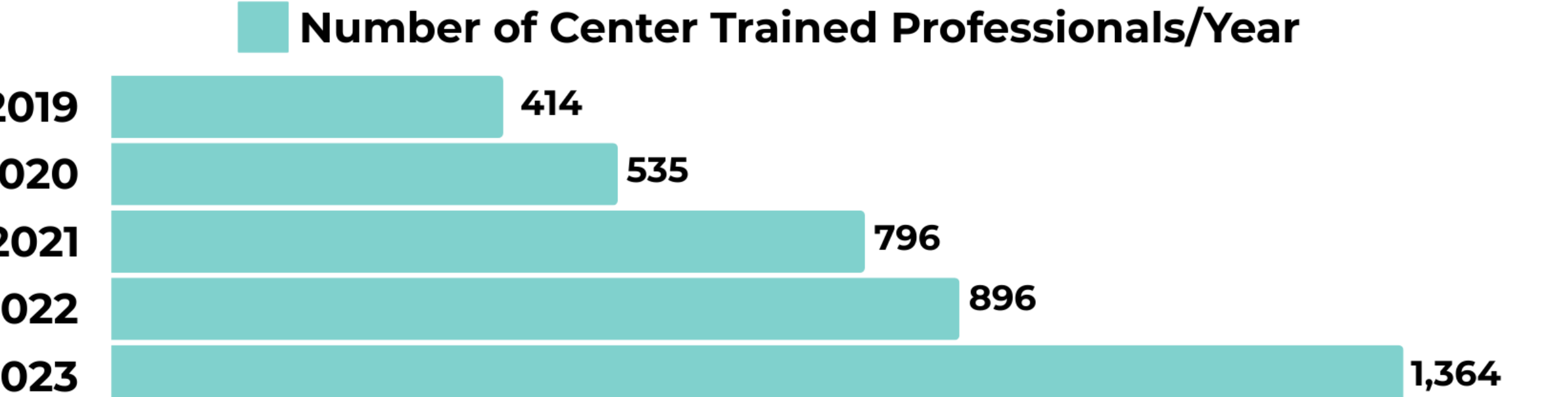
## Background

The Center at LSUHSC School of Public Health collaborates with the Louisiana Department of Health-Office of Behavioral Health (LDH-OBH) to increase the use of evidence-based programs (EBPs) by licensed mental health providers (LMHPs) in Louisiana.

**Vision:**  
 At the Center for Evidence to Practice, we envision a Louisiana where all individuals have access to a high quality, responsive and effective behavioral health system delivered by a well-trained workforce.

**Mission:**  
 We achieve this through the Center's mission to support Louisiana and its agencies, organizations, communities, and providers in the selection and implementation of research-driven behavioral health interventions while understanding and helping to address challenges related to sustaining quality practice that promotes well-being and improves outcomes.

The Center for Evidence to Practice focuses on trauma, disruptive behaviors, and parent-child relationships, aligning with current research on youth needs<sup>1,2,3</sup>.



This work helps increase the number of trained clinicians who use EBP-specific tracking codes within Medicaid claims. Full integration of these practices requires training and the effective use of these tracking codes, which facilitate proper Medicaid billing and measure the utilization and reach of EBP services.

Evidence-Based Practices (EBPs)	
CPP	Child-Parent Psychotherapy
PCIT	Parent-Child Interaction Therapy
YPT	Youth PTSD Treatment
PPT	Preschool PTSD Treatment
PPP	Positive Parenting Program - Triple P (Level 4)
TF-CBT	Trauma-Focused Cognitive Behavioral Therapy
EMDR	Eye Movement Desensitization and Reprocessing

In Louisiana, the underutilization of EBP billing codes has led to challenges such as underestimating EBP usage and inadequate provider compensations.

## Methods

The EBP Capacity and Sustainability Funding Project (C&S) directed additional funds to LMHPs who offered seven EBPs in Medicaid-funded outpatient therapy services.

- PROJECT GOALS:** to offset the costs to providers by
- 1) achieving EBP qualifications
  - 2) integrating EBP tracking codes within claims processes
  - 3) deliver EBP services, with consideration of volume



Funding amounts ranged from \$3500 - \$10,000 per service location. Agencies with multiple locations were eligible for up to \$40,000. Funding was determined based on the number of EBP-qualified practitioners using the EBP claim codes during the 5-month contract period (March-July 2022). A “volume bonus” of \$3,000 was also available for delivering multiple sessions of an EBP to multiple clients (three or more EBP sessions with at least three clients).

**HYPOTHESIS:** Additional funding will encourage the delivery of EBPs in the Medicaid provider network, encourage providers to continue to learn EBPs, and provide support and recognition of the time and costs that go into these models and help work out the challenges of using the EBP tracking codes.

## Outcomes

**C&S Provider Engagement**

- 30 providers participated
- 42 contracted
- 59 applications received
- 150 potential applicants

**Clinician Qualified in 1 or More EBPs**  
 N = 30 providers

- 3 EBPs, 2 Providers (6.7%)
- 2 EBPs, 7 Providers (23.3%)
- 1 EBP, 21 Providers (70%)

**Provider License Type (%)**

- Counseling: 55%
- Social Work: 42%
- PhD: 3%

**96%**  
 96% of the surveyed providers would recommend this type of funding opportunity to colleagues

*“I would recommend this type of funding opportunity to other EBP providers because it brings awareness to all of the hard work, training, and experience that professionals within this field are utilizing.”*  
 --C&S Program Participant

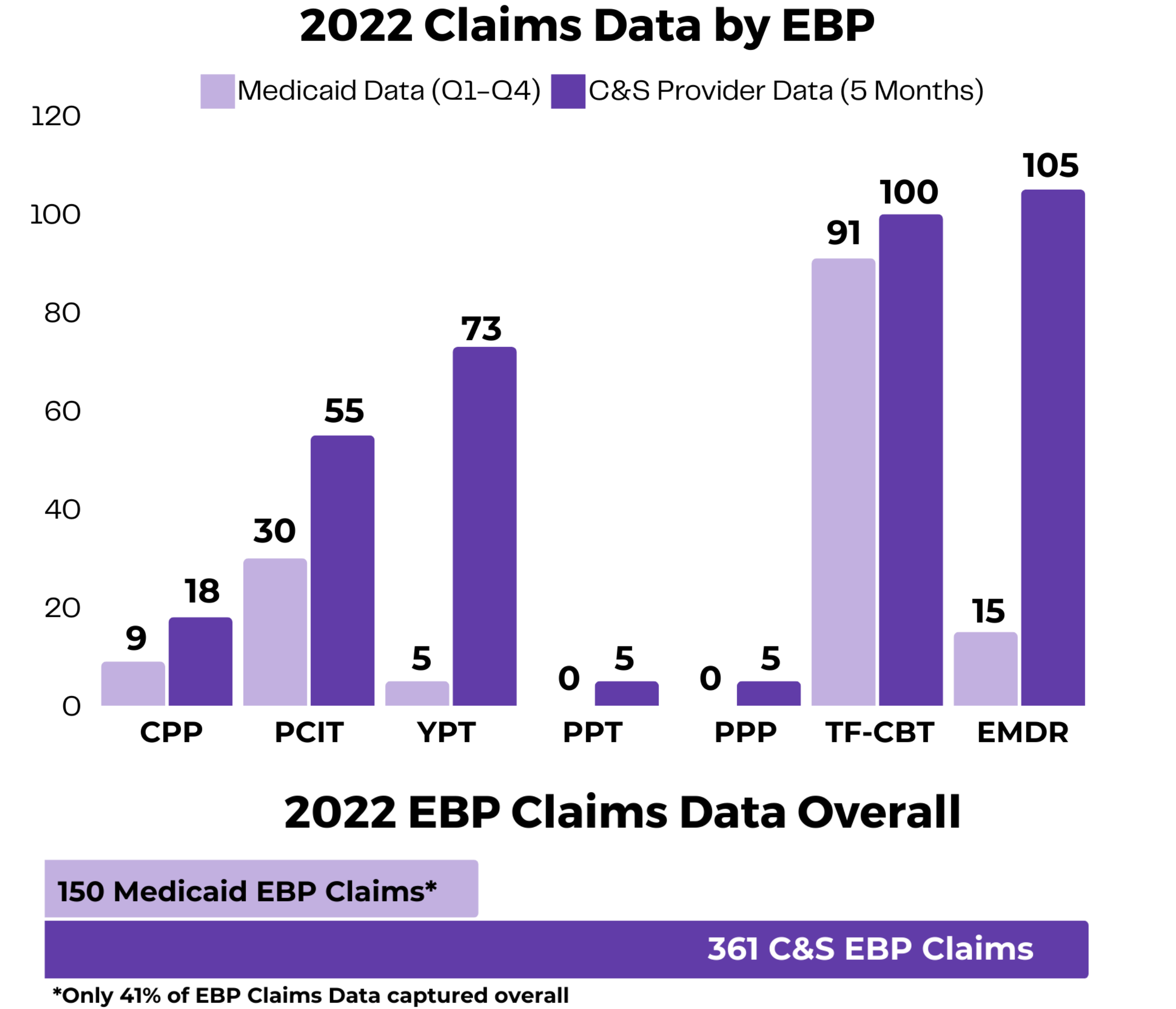
**Funding Utilization vs. Funding Allotted**

\$167,500\* vs \$694,050  
\*Only 24% of overall funding utilized

**Financial Impact**

30 providers were awarded funding:  
 • 16 were awarded funding for service delivery  
 • 14 received a “volume bonus” for service delivery

*“A lot of providers either quit or change their course of action because of the expenses related to EBP practice. This funding opportunity provides the opportunity for providers to participate in trainings and receive some extra much-needed support.”*  
 --C&S Program Participant



## Future Direction

**Limitation:** This opportunity was only available to LMHPs, it allotted a small sample size and limited audience for this pilot.

**STRENGTH:** The funding opportunity raised awareness and increased motivation to achieve the EBP qualification.

**Challenge:** Expectations on the use of the EBP tracking codes had been in place several years before this funding, many of the MCOs had not ensured that they were compatible with provider billing systems and the MCO credentialing processes.

**SOLUTION:** By increasing the adoption of EBP billing codes, the sustainability of EBP services can improve, provide valuable data for Medicaid to adjust compensation, and ensure fair support for LMHPs committed to high-quality care.

- RECOMMENDATIONS:**
1. Allow ease while navigating this process to be less cumbersome to increase utilization.
  2. Offer additional strategies to capture EBP utilization to include all service delivery models.

## References

References can be accessed by utilizing the QR code.

## Acknowledgements

I want to thank LDH-OBH for investing in this work and funding this pilot initiative. I want to thank everyone at the Center, including staff, consultants, and students who helped work on this initiative.