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Non-traditional providers play a growing role in behavioral health services for Medicaid beneficiaries in Missouri

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Background

Missouri and the country are in the midst of a behavioral health care workforce crisis¹. The number of designated Mental Health Provider Shortage Areas (in which the population-to-psychiatrist ratio is greater than 30,000 to 1) has increased from 10 in 2011 to 170 in 2022². At the same time, the need for behavioral health services has never been greater, as the rates of mental illness, suicide and drug overdoses has increased considerably in the last decade^{3,4}. Meeting these challenges requires increased contributions from advanced practice providers, a category that includes a range of professionals who are neither psychiatrists nor psychologists, such as licensed master social workers and professional counselors⁵. Research suggests that such providers can play an important role in delivering quality care for mental health^{6,7} and substance abuse issues⁸.

In this report, we use state databases to identify behavioral health care providers who treated meaningful numbers of Medicaid patients (10 or more) from 2017 to 2023. We employ this data to assess county-level trends in the behavioral health care workforce serving the neediest and most vulnerable Missourians, and to analyze the growing role of advanced practice providers in serving the needs of this population before and during the COVID-19 pandemic.

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Data and Methods

We used data drawn from the state of Missouri’s Medicaid provider and claims databases to generate counts of behavioral health care providers active in Medicaid for each year from 2017 to 2023. Specifically, we counted the following combinations of provider type and specialty:

- Psychologist
 - Specialties:
 - ◇ Psychologist
 - ◇ Social Worker
 - ◇ Professional Counselor
 - ◇ Licensed Master Social Worker
 - ◇ Licensed Marital and Family Therapist
 - ◇ Provisionally Licensed Behavioral Health Care Providers: aggregate of provisionally licensed psychologist, provisionally licensed professional

counselor and, provisionally licensed marital and family therapist

- Physician M.D., Physician D.O., and Assistant Physician
 - Specialty:
 - ◊ Psychiatry
- Nurse Practitioners
 - Specialty:
 - ◊ Psychiatric Nurse Practitioners

Only providers that billed Medicaid for at least 10 unique patients (DCN numbers) in a given year were included, ensuring that the counted providers actually provided a significant amount of care to the Medicaid population in that year. Providers were assigned to counties based on their billing addresses, which is not necessarily the county in which the relevant care was provided. For population adjustments, we used enrollment data on the total number of Medicaid beneficiaries (all ages and eligibility categories) in each county for each year.

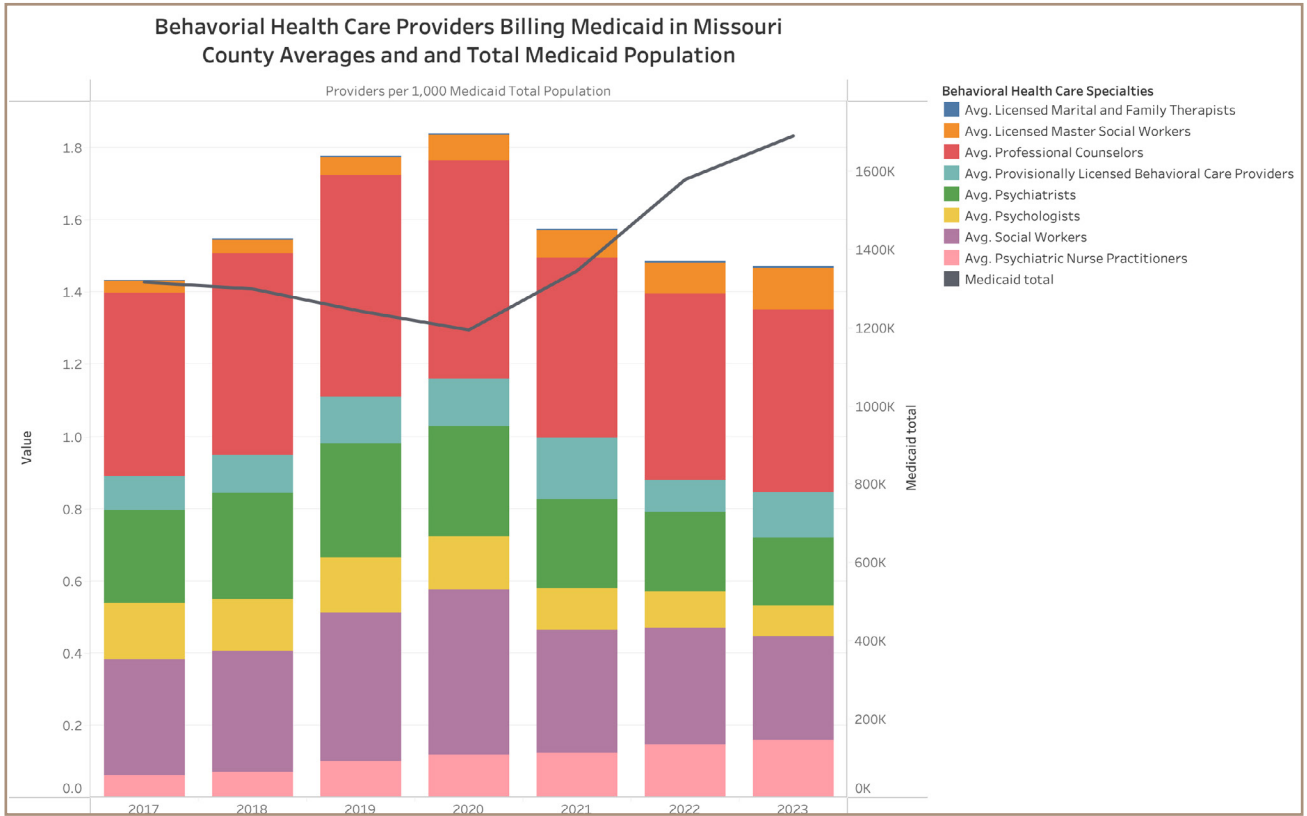
Findings

Consistent with national trends, the role of advanced practice providers (APPs) in behavioral health services for Missouri Medicaid patients has grown considerably between 2017 and 2023. While the total number of psychologists and psychiatrists billing Medicaid for at least 10 unique patients has declined from 1,083 in 2017 to 1,027 in 2023, the numbers of psychiatric nurse practitioners, professional counselors, social workers, licensed master social workers (LMSW), and provisionally licensed behavioral care providers have all grown substantially. In terms of raw numbers, professional counselors have grown the most (788 in 2017 to 1,042 in 2023), while LMSWs were the fastest-growing group in terms of percentage (64 to 279, a 436% increase).

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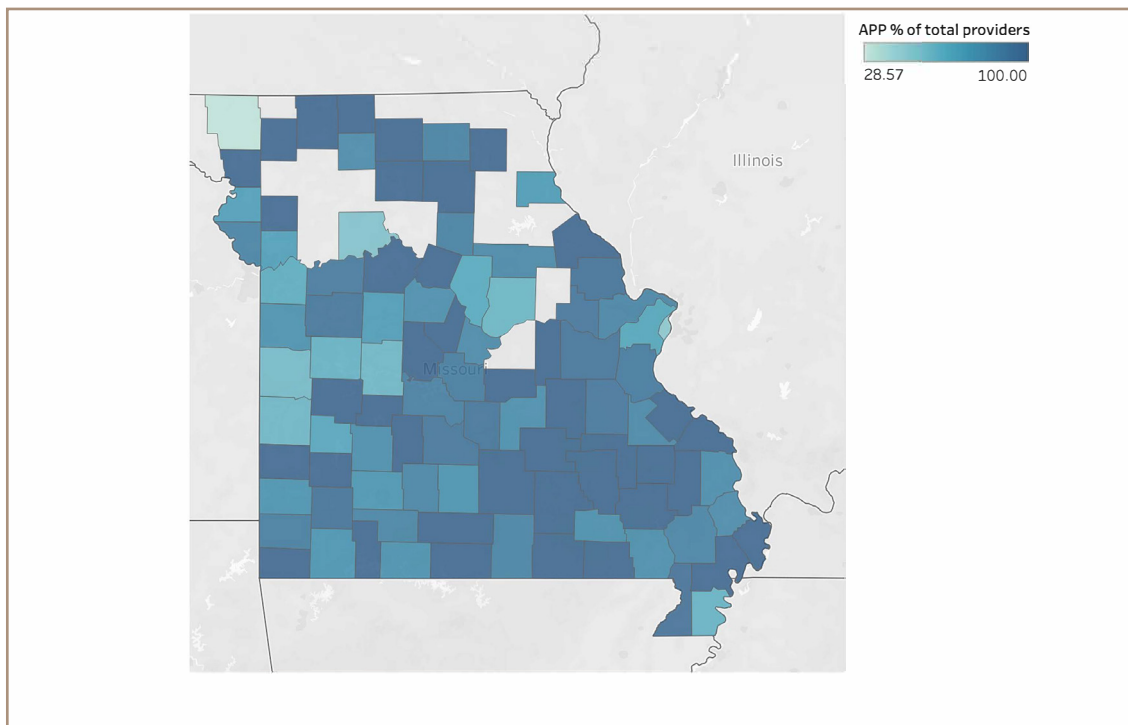
While the growth of these categories has helped to offset the decline of psychologists and psychiatrists billing Medicaid in Missouri, it has not been enough to reverse the recent decline in relation to the Medicaid population. As Figure 1 demonstrates, the county average number of providers per 1,000 Missouri Medicaid recipients grew between 2017 and 2020 before dropping precipitously from 2021 to 2023. As the line tracking total statewide Medicaid population shows, this is largely a function of growth in the Medicaid rolls due to continuous enrollment rules during the COVID-19 Public Health Emergency (January 31, 2020 to May 11, 2023) and implementation of the voter-approved expansion of Medicaid eligibility beginning on October 1, 2021.

Figure 1. Average Number of Behavioral Health Care Providers Billing Medicaid in Missouri by Specialty, Adjusted for County Medicaid Population, 2017-2023.



While Figure 1 establishes the importance of APPs to the statewide Medicaid behavioral care workforce, there is variation across counties, as Figure 2 demonstrates using 2023 data. Many of the most rural counties lack any behavioral care providers at all (particularly in the Northern part of the state), but among those with providers, APPs generally make up most or all of them.

Figure 2. Advanced Practice Providers as a Share of the Total Number of Behavioral Health Care Providers Billing Medicaid in 2023, by County.



Since growth in the Medicaid rolls has outstripped growth in the provider workforce, we now turn to the issue of changes in patient loads. As expected, the typical patient load has increased statewide, though there is considerable variation across counties. We calculated the median number of unique Medicaid patients (DCNs) treated by providers in each county for each year. Over 2020 to 2023, 68 of the 115 counties saw an increase in Medicaid patient loads by this metric. Table 1 shows the ten counties that saw the largest growth in the median DCN count over this time period. All are relatively small in terms of population (below the 2023 county average of 53,880), and all but one (Bates County) are outside the major metropolitan areas. As the 2020 median DCN counts show, these numbers do not necessarily indicate that existing providers in each county have been overwhelmed. In five counties (including four on this list), the growth is due to the addition of at least one provider serving Medicaid patients where there were none in 2020 (Oregon County being the fifth).

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Table 1. Counties with the largest growth in median unique Medicaid patients (DCNs) treated by behavioral health care providers from 2020 to 2023.

County	Median DCNs, 2020	Median DCNs, 2023	Change in median DCNs, 2020-2023	Population 2023	BRFSS region
New Madrid	70	659	589	15,424	Southeastern
Sullivan	0	222	222	5,797	Northeastern
McDonald	0	115	115	23,903	Southwestern
Nodaway	63.5	175	111.5	20,695	Northwestern
Linn	0	83	83	11,791	Northeastern
Wayne	22	96	74	10,811	Southeastern
Gasconade	38	101	63	14,705	Central
Bates	92	153	61	16,242	Kansas City
Butler	60	121	61	41,948	Southeastern
Knox	0	56	56	3,723	Northeastern

Conclusion

As Missouri's Medicaid roles grew from 2017 to 2023, the workforce available to treat Medicaid patients in traditional behavioral care specialties (psychology, psychiatry) was in decline. This trend was offset by the growth in advanced practice providers like psychiatric nurse practitioners, professional counselors, and licensed master social workers. Such providers play a large and growing role in providing behavioral health care to Medicaid beneficiaries in Missouri. In rural areas, such providers make up nearly all of the behavioral care workforce. Researchers and evaluators should consider the implications of these trends for the quality of behavioral care. Policymakers seeking to address issues of mental health and substance use disorders, especially in rural areas, should recognize the importance of advanced practice providers to the workforce serving the state's most vulnerable residents. Because the trends identified herein emerged during the COVID-19 pandemic, consequent public health emergency, and Missouri's implementation of Medicaid Expansion in late 2021, time will tell if they hold during the unwinding of the public health emergency and the state's adjustment to Medicaid Expansion.

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