



New Federal Analysis on Behavioral Health Workforce



(National Council for Behavioral Health article)

The Health Resources & Services Administration (HRSA) recently released national-level behavioral health workforce [estimates](#) for 2016 through 2030. The analysis, which was mandated by the 21st Century Cures Act, highlights how workforce shortages and an unequal distribution of providers have intensified access to care challenges for patients. HRSA reiterated that continued analysis on the behavioral health care workforce was essential to combatting the ongoing opioid crisis and noted that these findings aim to provide information on trends within the mental health and substance use disorder provider workforce.

In the report, HRSA explains that the magnitude of provider shortages can vary greatly, as certain areas of the country have few or no behavioral health providers available, according to HRSA analysis. Further, the shortage of a qualified behavioral health workforce is exacerbated by high turnover rates, a lack of professionals, aging workers and low compensation.

Among the key details of the report, HRSA calls to align efforts to build the behavioral health workforce with other work to address social determinants of health and improve delivery of mental health and substance use disorder treatments services. Greater integration of behavioral health services with other health services was stressed, and the health agency reported that the extent to which primary care providers are preventing, screening, or referring for mental health and substance use disorder services is an area still under active study.

HRSA explained that the following factors could help increase access to behavioral health services:

- (1) the use of health information technology;
- (2) elevation of prevention and recovery-oriented systems;
- (3) strengthening the quality of care and services delivered;
- (4) easing administrative burdens for physicians;
- (5) facilitating shifts in health care delivery models towards team-based care;
- (6) fully embracing telemedicine modalities; and
- (7) focusing attention on the value of using peers and paraprofessionals in behavioral health care delivery.

On Capitol Hill, the National Council and its members have worked to create policies to better help community-based mental health and addiction treatment providers attract and retain a well-trained workforce. [In the recently-enacted Opioid package \(H.R. 6\)](#), the National Council secured a provision to **create a new federal student loan forgiveness program for individuals working in addiction treatment and recovery support**. Additionally, the National Council has supported legislation to create a [similar program for mental health professionals](#). The National Council has also been a longtime advocate of the [Mental Health Access Improvement Act \(S. 1879/ H.R. 3032\)](#), which would allow licensed professional counselors and marriage and family therapists to bill Medicare for their services.

DETAILED ANALYSIS

HRSA produced the following occupation-specific analyses on the behavioral health care workforce:

- **Addiction Counselors** — At the national level, the supply of addiction counselors is projected to increase 6 percent between 2016 and 2030. Demand for addiction counselors may increase anywhere between 21 to 38 percent by 2030, resulting in a deficit of addiction counselors. ([Fact Sheet](#))
 - **Marriage and Family Therapists** — At the national level, the supply of marriage and family therapists is expected to increase by 41 percent between 2016 and 2030. Demand for marriage and family therapists may increase by 14 percent by 2030, suggesting the U.S. will have a sufficient supply to meet projected demand. ([Fact Sheet](#))
 - **Mental Health and School Counselors** — At the national level, the supply of mental health counselors is projected to increase by 13 percent between 2016 and 2030, with demand increasing by 18 to 20 percent over the same time period. This would result in a deficit of mental health counselors by 2030. The supply of school counselors is projected to increase by 101 percent between 2016 and 2030 and increase in demand by one to three percent. This would allow for a modest surplus of school counselors by 2030. ([Fact Sheet](#))
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- **Psychiatric Technicians and Psychiatric Aides** — HRSA did not predict changes in supply, due to unique challenges in determining future competitiveness of wages, benefits, and workplace characteristics in the model used. Demand for psychiatric technicians is expected to increase anywhere from 13 to 16 percent, whereas demand for psychiatric aides may increase by 16 percent. ([Fact Sheet](#))
- **Psychiatric Nurse Practitioners (NPs) and Psychiatric Physician Assistants (PAs)** — Between the years 2016 and 2030, the national supply of psychiatric NPs and PAs is projected to grow by 67 percent. Demand for psychiatric NPs and PAs is expected to increase by 17 percent, resulting in a sufficient supply of NP and PA services by 2030. ([Fact Sheet](#))
- **Psychiatrists** — At the national level, approximately 39,180 psychiatrists were active in the U.S. workforce in 2016, but by 2030, the supply of psychiatrists is expected to decrease by approximately 27 percent given the number of psychiatrists entering, leaving, and changing work hours. Demand for psychiatrists is expected to increase by six percent, resulting in a shortage of psychiatrists by 2030. ([Fact Sheet](#))
- **Psychologists** — At the national level, approximately 92,990 psychologists were active in the U.S. workforce in 2016, but by 2030, the supply of psychologists is expected to increase by approximately 13 percent. Demand for psychologists is expected to increase by seven percent, resulting in a shortage of psychologists by 2030. ([Fact Sheet](#))
- **Social Workers** — Between 2016 and 2030, the national supply of social workers with a graduate degree is projected to grow from 232,900 FTEs to 520,450, or 123 percent. Demand is expected to increase by 15 percent, resulting in a sufficient supply of graduate degree-prepared social workers to meet projected demand growth in 2030. ([Fact Sheet](#))

Additionally, HRSA conducted [analysis](#) on state-level projections of supply and demand for behavioral health occupations from 2016 to 2030. The health agency also [estimated](#) of the number of new entrants into the behavioral health workforce between 2016 and 2021, and predicts an additional 276,400 behavioral health workers by 2021.

Website: <https://bhw.hrsa.gov/national-center-health-workforce-analysis>

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