



# Addressing the Growing Behavioral Health Crisis Among Seniors

*How health plans can overcome barriers to care to maximize durable healthcare outcomes and cost savings.*

Behavioral health conditions such as depression, anxiety, and substance use disorder are growing among seniors age 65 and older. According to the Kaiser Foundation, [1 in 4 seniors<sup>1</sup>](#) report symptoms of depression or anxiety. Meanwhile, the National Institute of Health reports that [65 percent of seniors<sup>2</sup>](#) engage in high-risk alcohol consumption. In total, more than **1 million seniors** are living with **substance use disorder**, many dependent on prescription medications and opioids.

Unfortunately, behavioral health conditions are often very difficult to recognize and diagnose. And because research data relies on surveys and self-reporting, there's a high probability that we're ultimately undercounting the prevalence of these conditions.

At the same time, the pandemic has likely amplified these issues. Given social isolation and widespread illness, there's [mounting evidence<sup>3</sup>](#) that more seniors than ever have developed symptoms of depression and anxiety.



**25%**

Report depression  
or anxiety



**65%**

Engage in high-risk  
alcohol consumption



# Why it matters

Unaddressed behavioral health needs present a serious challenge for health plans that manage Medicare. This is because behavioral health conditions are often linked to higher-cost comorbidities like hypertension, high cholesterol, and obesity.

So, as the prevalence of behavioral health conditions continues to rise, so do the associated costs.

For example, [one study found](#)<sup>4</sup> that patients with depression and cardiovascular disease have lower rates of medication adherence, increased rates of smoking, and lower levels of physical activity. These all contribute to worse cardiac outcomes and potentially avoidable costs.

Another [recent study revealed](#)<sup>5</sup> that Medicare members with both a behavioral health diagnosis and at least two comorbid conditions had double the healthcare costs compared to those with none of these diagnoses. With five comorbid conditions, the costs increased fivefold.

Potentially more troubling, the researchers found that “the vast majority (85 percent) of spending was attributed to treatment of the physical comorbidities” and not the underlying behavioral health conditions.

This evidence is in line with broader trends throughout the healthcare industry. [Recent estimates](#)<sup>6</sup> indicate that a mere 5 percent of health plan members account for 44 percent of total claims costs.

The bottom line: behavioral health conditions among seniors continues to drive suboptimal healthcare consumption, mostly through too many ED visits and inpatient readmission. That’s why it’s more important than ever for health plans to identify and treat members living with unaddressed behavioral health needs.

You can’t tackle costs until you first tackle behavioral health.

## Barriers to Care

Despite the rising numbers and healthcare costs associated with this vulnerable Medicare population, engaging seniors with unaddressed behavioral health needs and other chronic conditions can present significant challenges for health plans.

**1 Lack of specialist training:** As Ontrak Health Chief Medical Officer Dr. Judith Feld explains [in this recent article](#)<sup>7</sup>, primary care providers (PCPs) may not have the needed training to recognize behavioral health needs. And even among those who do have the needed training, they may not have the time or resources to conduct the necessary diagnostic work. PCPs are often overwhelmed, especially those who regularly treat Medicare members.

In addition, seniors living with unaddressed behavioral health needs may be more likely to visit emergency departments, which are often also ill-equipped to diagnose and treat hidden behavioral health conditions.

**2 Misidentification:** Sometimes symptoms associated with behavioral health conditions are misattributed to the aging process itself.

What we might recognize as a real problem for a younger member may not carry the same clinical weight for senior. In other words, typical diagnostic processes may not be optimized for seniors living with hidden behavioral health needs.

- 3 Perceived stigma:** Compared to younger members for whom behavioral and mental healthcare might be more normalized, older members may not be similarly inclined to seek treatment—even when they know they have a problem. So, there’s a lot of work that health plans need to do up front with members. They have to build trust and confidence. They have to let senior members know that it’s okay to get help and support.

Persistence, trust, empathy, and the instillation of hope are essential elements to build required rapport and retention. But many health plans lack the resources for this kind of outreach.

**4 Social determinants of health:**

Treatment for behavioral health requires consistent support and persistence from providers. This is partly what makes treating behavioral health needs so difficult.

Even when seniors are initially engaged, several factors can undermine this kind of consistent treatment. Factors may include lack transportation, social isolation, economic limitations, and health literacy challenges.

In addition, technology barriers may be especially salient. Seniors may not have access to reliable broadband services. They may be disinclined to use telehealth services. And unlike younger generations may be less likely to regularly use mobile apps to engage.

- 5 Network limitations:** Finally, many health plans have limited behavioral healthcare networks, which means members lack both access and availability. As Jenifer True Donahue, Ontrak Vice President of Provider Services and Operations, [explains in this article](#)<sup>8</sup> logistical hurdles make network expansion very difficult. You need strong provider relationships as well as a care and support model likely to generate buy in from prospective providers.





# A Whole Person Solution: Four Steps to Success

Given the significant challenges seniors and health plans face, a fresh approach is needed.

Ontrak Health is an [augmented intelligence](#)<sup>9</sup> (AI) and telehealth enabled behavioral health company. We use our proprietary algorithms to identify members living with unaddressed behavioral health conditions.

Then we systematically and compassionately engage them through our trained care coaches, helping to remove barriers to care.

Finally, we connect members to behavioral health providers through our 43-state behavioral health network.



Our four-step model, utilizes a whole-person approach that addresses each individual's unique needs.

## Step 1: Identify

Using AI and a variety of data sources, Ontrak's analytics uncover populations with previously unaddressed behavioral health needs, even absent a diagnosis. Advanced algorithms impute who is most likely to benefit from treatment, which is typically between 3% and 5% of a health plan's total covered lives.

Our model looks beyond factors such as age to find more predictive attributes. We have 21 different features related to co-occurring medical conditions, for example. We also have features related to utilization patterns, demographic factors, and prescription characteristics.

## Step 2: Engage

Ontrak's team of dedicated enrollment specialists, care coaches, and member success specialists mobilize to engage members and build trust.

Instead of directly confronting members about behavioral health conditions, our enrollment specialists focus on listening, which drives our industry-leading enrollment levels. Empathetic listening gives us a real chance to build meaningful relationships, which are critical for long-term success.

Then our Care Coaches take over. They work to address social determinants of health, remove access barriers, engage network providers, and help maximize program retention.

With senior members especially, special care is taken to avoid stigma through motivational interviewing techniques. Motivational interviewing is an evidence-based approach to behavior change designed to empower members by identifying their values, needs, abilities, and barriers up front.

### Step #3: Treat

One thing that sets Ontrak Health apart is our approach to provider networks. We have forged incredibly strong provider relationships because of our shared mission—and commitment to member success.

Providers value our model because we support their work with consistent and systematic care coaching, which helps ensure members stick to their full treatment plan.

With up to 52 weeks of an evidence-based, personalized, coach-driven program, members are more likely to achieve significant behavior change, resulting in better health outcomes and significant cost reduction.

### Step #4: Activate

Upon successful completion of Ontrak's program, seniors can demonstrably overcome or better manage behavioral health issues that create barriers to obtaining care for other chronic conditions. They are more closely connected with their primary care physicians, behavioral health providers and health plans, and have realized durable behavior and lifestyle changes.

Ultimately, these seniors have become “activated,” meaning that they achieved the knowledge, skills, health literacy, and confidence to enable them to manage their conditions, improving their health and reducing medical utilization.

## With Ontrak, help is here.

The number of seniors anticipated to experience behavioral health issues will rise steadily over the next decade. Now is the time for health plans to take steps to prepare for this escalating challenge.

Seniors present several unique challenges associated with behavioral health. Among other things, they face higher rates of other chronic conditions, underdiagnosis by medical professionals, and other social determinants of health.

Health plans can affect behavior change in this hard-to-reach population by adopting a whole-person approach to caring for seniors with behavioral health challenges. Partnering with Ontrak, plans can meaningfully improve care and outcomes for this population.

Our behavior change program, which includes up to 52 weeks of therapist-led and coach-driven care, delivers real results and helps promote durable health outcomes.



**42%**

reduction in  
ED utilization



**63%**

reduction in  
inpatient admissions



**2x**

ROI in the  
first year



**\$11,664**

avg. gross savings per  
member over 24 months

Discover what's possible for your members. Request a demo today.

<sup>1</sup>Kaiser Family Foundation. Wyatt Koma, Sarah True, Jeannie Fuglesten Biniek, Kendal Orgera, and Rachel Garfield. *One in Four Older Adults Report Anxiety or Depression Amid the COVID-19 Pandemic*. Published: Oct 09, 2020.

<sup>2</sup>National Institute on Drug Abuse. *Substance Use in Older Adults Drug Facts*. <https://nida.nih.gov/publications/drugfacts/substance-use-in-older-adults-drugfacts>

<sup>3</sup>Int J Geriatr Psychiatry. *The COVID19 pandemic's impact on older adults' mental health: Contributing factors, coping strategies, and opportunities for improvement*. 2022 Jan; 37(1): 10.1002/gps.5647. Published: Nov 15, 2021.

<sup>4</sup>National Library of Medicine. Carly M. Goldstein, Emily C. Gathright, and Sarah Garcia. *Relationship between depression and medication adherence in cardiovascular disease: the perfect challenge for the integrated care team*. 2017; 11: 547–559. Published: Mar 15, 2017.

<sup>5</sup>Health Affairs, VOL. 36, NO. 1. Ken Thorpe, Sanjula Jain, and Peter Joski. *Prevalence And Spending Associated With Patients Who Have A Behavioral Health Disorder And Other Conditions*. Published: Jan 2017. <https://doi.org/10.1377/hlthaff.2016.0875>

<sup>6</sup>Milliman, Inc. The Path Forward for Mental Health and Substance Use by the Mental Health Treatment and Research Institute LLC. Stoddard Davenport, Travis J. (T.J.) Gray, and Stephen P. Melek. *How do individuals with behavioral health conditions contribute to physical and total healthcare spending?* Published: August 13, 2020. <https://www.milliman.com/en/insight/How-do-individuals-with-behavioral-health-conditions-contribute-to-physical>

<sup>7</sup>Judy Feld, MD, MPH, MMM, Ontrak Health Chief Medical Office. *It starts with care coaches: Right-sizing care to address behavioral health needs*. Published: October 21, 2022. <https://ontrakhealth.com/resources/articles-blog/>

<sup>8</sup>Jennifer True Donahue, Vice President, Provider Services and Operations, Ontrak Health. *Access and Availability: How to effectively expand—and improve—your behavioral health network*. Published: December 13, 2022. <https://ontrakhealth.com/resources/articles-blog/>

<sup>9</sup>Len Bickman, Chief Augmented Intelligence Officer, Ontrak Health. *How AI technologies are transforming the member journey in behavioral health*. Published: November 8, 2022. <https://ontrakhealth.com/resources/articles-blog/>



---

## About Ontrak Health

Ontrak, Inc. is a leading AI and telehealth-enabled healthcare company, whose mission is to help improve the health and save the lives of as many people as possible. Ontrak identifies, engages, activates and provides care pathways to treatment for the most vulnerable members of the behavioral health population who would otherwise fall through the cracks of the healthcare system. We engage individuals with anxiety, depression, substance use disorder and chronic disease through personalized care coaching and customized care pathways that help them receive the treatment and advocacy they need, despite the socio-economic, medical and health system barriers that exacerbate the severity of their comorbid illnesses. The company's integrated intervention platform uses AI, predictive analytics and digital interfaces combined with dozens of care coach engagements to deliver improved member health, better healthcare system utilization, and durable outcomes and savings to healthcare payors.

### FOR MORE INFORMATION:

Web: <https://OntrakHealth.com>

Email: [hello@OntrakHealth.com](mailto:hello@OntrakHealth.com)

Toll Free: 1-866-517-1414