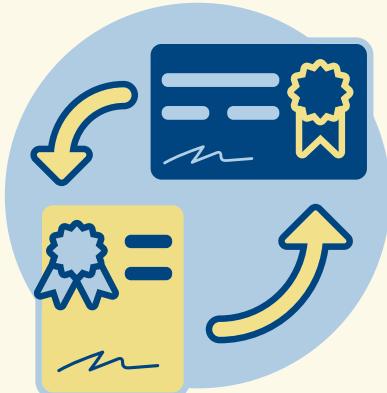




Addiction Technology Transfer Center Network
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Strategic Response to Behavioral Workforce Shortages



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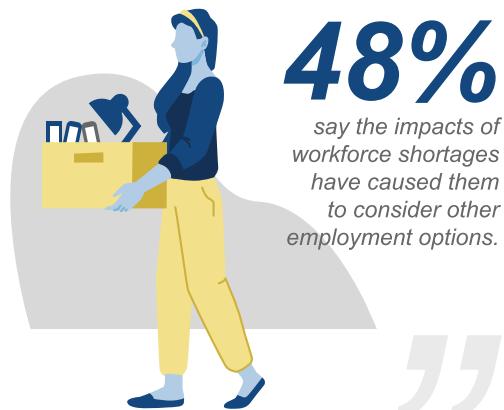
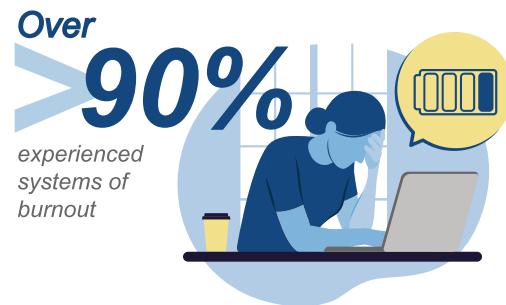
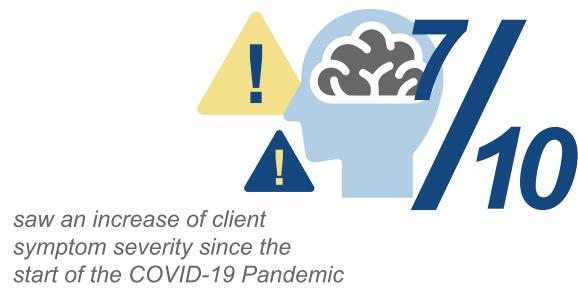
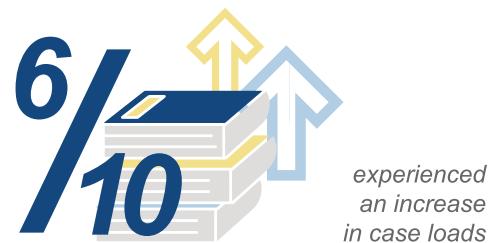
The ATTC Network Workforce Development Coordination Group (WDCG) works to identify barriers in retention and recruitment of the behavioral health workforce and provides recommendations for addressing those barriers. According to the Health Resources and Services Administration (HRSA), 166 million Americans live in Mental Health Professional Shortage Areas.¹ By 2025, the United States (U.S.) will have an overall shortage of 31,000 mental health providers.² At the height of the COVID-19 pandemic, 40% of U.S. adults reported depression or anxiety symptoms³, and yet over half of all U.S. counties are without a practicing psychiatrist.⁴

The shortages seen across the country are exacerbating burnout in an already challenged behavioral health workforce. In a survey of behavioral health workers, the National Council for Mental Wellbeing found 6 in 10 experienced an increase in case loads and 7 in 10 saw an increase of client symptom severity since the COVID-19 pandemic began. Over 90% experienced symptoms of burnout, and 48% say the impacts of workforce shortages have caused them to consider other employment options.⁵

To address the concerns in retaining employees, as well as ongoing recruitment needs, the ATTC Network WDCG has identified three areas of focus:

- 1. recruitment of new employees to the field,
- 2. competitive pay, and
- 3. portability of licenses and certifications.

In a survey of behavioral health workers, the National Council for Mental Wellbeing found



¹ Health Resources and Services Administration. (n.d.). Health Workforce Shortage Areas. <https://data.hrsa.gov/topics/health-workforce/shortage-areas>

² Plescia, M. (2023, March 15). How SAMHSA is tackling the mental health workforce shortage. MedCity News. <https://medcitynews.com/2023/03/how-samhsa-is-tackling-the-mental-health-workforce-shortage/>

³ Weiner, S. (2022, August 9). A growing psychiatrist shortage and an enormous demand for mental health services. AAMC. <https://www.aamc.org/news/growing-psychiatrist-shortage-enormous-demand-mental-health-services>

⁴ United States Government Accountability Office. (2022, October). Behavioral Health: Available Workforce Information and Federal Actions to Help Recruit and Retain Providers. <https://www.gao.gov/assets/gao-23-105250.pdf>

⁵ National Council for Mental Wellbeing. (2023, April 25). New Study: Behavioral Health Workforce Shortage Will Negatively Impact Society. <https://www.thenationalcouncil.org/news/help-wanted/>



AREA OF FOCUS

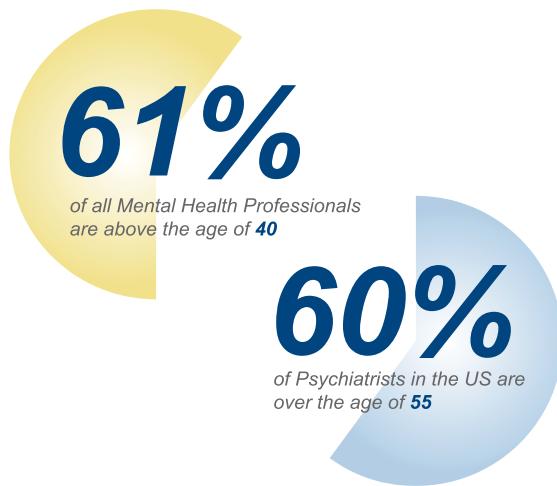
RECRUITMENT OF NEW EMPLOYEES TO THE FIELD

With the high levels of burnout and large case-loads, recruitment of new employees through various pathways is imperative to meet the growing behavioral health needs in the U.S.. In addition, the aging workforce is also a concern. 61% of all mental health professionals are above the age of 40⁶, and 60% of psychiatrists in the U.S. are above the age of 55⁷. Concerns for recruitment in the future lie in the lack of exposure to the mental health profession for students in grades K-12. That in addition to most licenses requiring a graduate degree and unpaid internship hours create barriers for recruitment, particularly in communities of color and those with lower socioeconomic backgrounds. Diversity among mental health professionals does not reflect the racial and ethnic diversity of the communities being served, with 74% identifying as white.⁶

Recommendations

Exposure to Career Pathways in K-12 and Post-Secondary Settings

Career pathways programs partner educators and employers to provide education and training to students from kindergarten through college in fields with worker shortages. Similar programs exist in the healthcare field for entry-level roles with high need. Creation of these programs for the behavioral health field at the state level can address recruitment needs by funding such programs to expose students to mental health professions and offering apprenticeships or paid on-the-job training to enter into the field.⁸



Creating Additional Entry Points through Grants, Fellowships, and Tuition Reimbursement

Expansion of programs such as HRSA's Behavioral Health Workforce Education and Training Program and SAMHSA's Minority Fellowship Programs can create more opportunities for the field to address racial and ethnic diversity in the workforce. Many states have started offering tuition reimbursement to recruit and retain employees in the behavioral health workforce to address shortages.⁸ Investment in such programs lowers the financial barriers often associated with entering the behavioral health field, including obtaining a graduate degree and years of unpaid masters-level internship work.⁹



Diversity among mental health professionals does not reflect the racial and ethnic diversity of the communities being served, with **74%** identifying as white.



⁶ Mental Health Professional Demographics and Statistics in the U.S. Zippia. (n.d.). <https://www.zippia.com/mental-health-professional-jobs-demographics/>

⁷ Active physicians by age and specialty, 2019. AAMC. (2019, November). <https://www.aamc.org/data-reports/workforce/data/active-physicians-age-and-specialty-2019>

⁸ National Conference of State Legislatures. (2022, May 20). State strategies to recruit and retain the Behavioral Health Workforce. <https://www.ncsl.org/health/state-strategies-to-recruit-and-retain-the-behavioral-health-workforce>

⁹ United States Government Accountability Office. (2022, October). Behavioral Health: Available Workforce Information and Federal Actions to Help Recruit and Retain Providers. <https://www.gao.gov/assets/gao-23-105250.pdf>

Pay for Interns

Field placement hours are required to obtain a degree in the behavioral health field. For example, the Council on Social Work Education requires 1,000 hours of field work over two academic years before social workers obtain their Master of Social Work degree. These required clinical training hours are obtained in community settings, and are typically unpaid. The ability for students to work for free in addition to paying for a masters degree requires significant financial support. Unpaid internships may cause undue financial hardship for students entering the behavioral health field, likely turning potential students towards other fields that offer paid on-the-job training. Students from lower socioeconomic backgrounds, including racial and ethnic communities of color, are less likely to have the resources to work unpaid hours for multiple years, turning them away from the field. Investing in pay for interns, whether at the organizational or state level, is imperative to recruiting and diversifying the behavioral health workforce.¹⁰

Increase Pathways for Peer Support Specialists and Addictions Counselors

Peer support specialists and addictions counselors are both emerging fields within the behavioral health workforce that have lower barriers of entry. Workers in both fields are required to obtain credentialing through their respective state. Each state has its own education and experience requirements, and Medicaid reimbursement amounts vary depending on the state. Expanding opportunities to enter into one of these fields can help bolster shortages of mental health professionals, and investment in Medicaid reimbursement will make these fields more lucrative for recruiting new employees.¹¹

¹⁰ Washington Workforce Training and Education Coordinating Board. (2022). 2022 Behavioral Health Workforce Assessment: A report of the Behavioral Health Workforce Advisory Committee. https://www.wtb.wa.gov/wp-content/uploads/2022/12/BHWAC-2022-report_FINAL.pdf

¹¹ National Conference of State Legislatures. (2022, May 20). State strategies to recruit and retain the Behavioral Health Workforce. <https://www.ncsl.org/health/state-strategies-to-recruit-and-retain-the-behavioral-health-workforce>

¹² Colorado Legislative Council Staff Fiscal Note. (2015, May 18). HB15-1274 FINAL FISCAL NOTE. https://statebillinfo.com/bills/fiscal/15/HB1274_f1.pdf

Examples

Colorado, Funding Career Pathways in Behavioral Health

In 2015, the Colorado state legislature passed funding for the creation of various career pathways with high demand, including the behavioral health field. The bill required various state offices, including the State Board for Community Colleges and Occupational Education collaborate with the Department of Higher Education, the Colorado Department of Education, and the Colorado Department of Labor and Employment, to design career pathways for students seeking employment.¹² These efforts created free online resources, called My Colorado Journey,¹³ to help students navigate training and education, including entry-level, mid-level, and advance level careers in the behavioral health workforce.

Washington, Funding for Establishing Apprenticeship Programs

In 2021, the Washington state legislature appropriated \$1.5 million for the creation of paid apprenticeship programs to address the behavioral health shortage.¹⁴ With the funds, the goal is to create a registered apprenticeship program for on-the-job training in an “earn-while-you-learn” model, reducing cost barriers of entering the behavioral health field.¹⁵

Connecticut, Certified Recovery Coach Training in Spanish

In the New England ATTC, there has been a focus on offering more inclusive and equitable recruitment, training, and on boarding in an effort to address the workforce crisis by increasing equitable access and quality training for the be-

¹³ My Colorado Journey. (n.d.). Behavioral Health. <https://www.mycoloradojourney.com/journey/tools/careers/behavioral-health>

¹⁴ Washington State Legislature. (n.d.). HB 1094 - 2023-24. <https://app.leg.wa.gov/billsummary?BillNumber=1094&Year=2023&Initiative=false>

¹⁵ Washington Workforce Training and Education Coordinating Board. (2020, December 1). Washington's Behavioral Health Workforce: Barriers and Solutions. <https://www.wtb.wa.gov/wp-content/uploads/2020/11/Behavioral-Health-Workforce-Assessment-2020.pdf>

havioral health workforce. Following the trend of growth in the workforce in the area of peer workers, the Connecticut Community for Addiction Recovery (CCAR) offers the Recovery Coach Academy training in Spanish. The training content includes 30 hours that can be used towards becoming a certified Certified Recovery Coach for new and existing peers.¹⁶



Action Steps

At an organizational level, state level, and as leaders in the behavioral health field, advocacy for funding the creation of career pathways is crucial in order to increase recruitment of new employees into the field. Appropriation of funds for similar apprenticeship programs can draw interest from entry-level workers who may face financial barriers to earning a degree before entering the field. The field is in need of younger workers as well as workers from diverse backgrounds to meet demand. States and organizations can increase accessibility to entry level positions in the field by offering training in various languages to encourage bilingual candidates to the behavioral health field.

¹⁵ Connecticut Center for Recovery (CCAR) Training Programs. (n.d.) Recovery Resources CT. <https://addictionrecoverytraining.org/training-products/>



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COMPETITIVE PAY

In the U.S., low pay in the behavioral health field has long been a concern for retaining current employees and recruiting new employees to the field. The onset of the COVID-19 pandemic exacerbated the financial strain put on employees in the field, with cumulative inflation increasing by 19% from January 2020 to September 2023.¹⁷ According to the U.S. Bureau of Labor and Statistics, the median annual salary for Substance Use Disorder, Behavioral Health, and Mental Health Disorder Professionals in 2022 was \$49,710,¹⁸ while the median annual salary for social workers was \$55,350.¹⁹ Some professions often require a master's degree for licensure.

Due to the financial concerns of working in the behavioral health field, many licensed mental health providers aspire to work in the private sector - either in private practice or at for-profit companies - for better pay. According to Zippia, a career website focused on trends in the workforce, 74% of all mental health professionals work in the private sector.²⁰ These trends leave the public sector with a shortage of providers, increasing burnout and affecting retention for employees.

2022 Median Salaries

\$49,710

Substance Use Disorder, Behavioral Health, and Mental Health Disorder Professionals

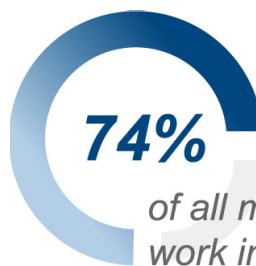
\$55,350

Social Workers

Recommendations

Performance bonuses and annual pay increases

In order to retain employees, regular pay increases and performance bonuses are encouraged to remain competitive. Regular monetary rewards and pay increases contribute to employee feelings of belonging and well-being. Organizations providing clear avenues for promotion, recognition of staff, and transparency of pay see increases of staff job satisfaction and professional development. When staff feel valued and have a sense of professional and individual growth, retention also improves.²¹



of all mental health professionals work in **the private sector**.

Benefits packages and other forms of compensation

In addition to regular pay increases, organizations can remain competitive and increase retention by offering benefits packages that promote work-life balance.²¹

These include:

- subsidies for child or elderly care
- flexible scheduling (including working from home when possible)
- competitive vacation
- four-day work week
- compensatory (comp) time or overtime pay.

¹⁷ U.S. Bureau of Labor Statistics. (n.d.). CPI inflation calculator. <https://data.bls.gov/cgi-bin/cpicalc.pl>

¹⁸ U.S. Bureau of Labor Statistics. (2023, September 6). Substance abuse, behavioral disorder, and Mental Health Counselors : Occupational Outlook Handbook. <https://www.bls.gov/ooh/community-and-social-service/substance-abuse-behavioral-disorder-and-mental-health-counselors.htm>

¹⁹ U.S. Bureau of Labor Statistics. (2023b, September 6). Social Workers : Occupational outlook handbook. <https://www.bls.gov/ooh/community-and-social-service/social-workers.htm>

²⁰ Mental Health Professional Demographics and Statistics in the U.S. Zippia. (n.d.). <https://www.zippia.com/mental-health-professional-jobs/demographics/>

²¹ Addressing Burnout in the Behavioral Health Workforce Through Organizational Strategies. SAMHSA. (2022). https://store.samhsa.gov/sites/default/files/SAMHSA_Digital_Download/pep22-06-02-005.pdf

Examples

Compensation Studies

Compensation studies review an organization's pay structure and compare salaries for roles in similar organizations, encouraging employers to update their salary structures to retain employees. Third-party consultants will evaluate job descriptions, cost of living trends, and demand for specific roles, and compare them to other organizations of similar size and budget. A compensation study should be completed at regular intervals (e.g. every two to four years), and organizations should be transparent on the findings with their employees. If current employees are below the minimum pay found in the compensation study, their salaries should be immediately adjusted, and all new employees should be compensated on the new payment schedule.²²

Student Loan Forgiveness/Repayment

With graduate degrees being a minimum education requirement for many behavioral health licenses, student debt has become a major life stressor for employees. According to the American Psychological Association, the median student loan debt for graduate students in clinical, counseling, school and combined psychology programs is \$80,000.²³ In addition to competitive pay, organizations can offer student loan relief as incentives to their employees. Expanding programs such as the National Health Service Corps and other State Loan Repayment Programs can help bring providers to Mental Health Professional shortage areas.²⁴

Nevada - Increase Cost of Living Allocation

In 2023 the Nevada System of Higher Education awarded a 12% Cost Of Living Allocation increase year-over-year for all NSHE institutions.²⁵ This adjustment impacts monthly pay and helps employees build contributions to their retirement fund.

Floating Holidays

A growing trend in agencies across the country is to provide a few days a year for employees to use at their discretion as a floating holiday. This is a step towards cultural responsiveness for those who celebrate holidays that may not be federally recognized, or can be used as days for themselves.

Self-care PTO for Domestic Violence Workers.

In one domestic violence agency, direct care workers receive an additional two weeks of PTO separate from personal PTO. This PTO was a requirement and had to be taken in one chunk. The agency saw a huge increase in applications and a shift in the type of candidates who were applying for these roles.

4 Day/32 Hour Work Week

Industries both in the U.S. and abroad have adopted a four-day, 32-hour work week. In the U.S., many school districts have transitioned to a four-day work week to help retain teachers and address budget constraints. In districts that implement this shift, schools are seeing more applications from surrounding districts to fill vacancies, and retention of teachers has increased.²⁶

²² Compensation Study Frequently Asked Questions. City of Madison, Wisconsin. (n.d.). <https://www.cityofmadison.com/human-resources/compensation/compensation-study-frequently-asked-questions>

²³ Clay, R. A. (n.d.). Crushed by debt? Psychology graduate students are graduating with huge student loan debts. APA and APAGS are working to help. American Psychological Association. <https://www.apa.org/gradpsych/2013/11/debt>

²⁴ U.S Department of Health and Human Services. (2023, February 3). Licensure for behavioral health. telehealth.hhs.gov <https://telehealth.hhs.gov/licensure/licensure-for-behavioral-health>

²⁵ Nevada System of Higher Education. (2023, July 5). NSHE Board of Regents Approves Up to 12% Cost-of-Living Allocation (COLA) Increase for Employees. <https://nshe.nevada.edu/system-administration/news/2023/07/nshe-board-of-regents-approves-up-to-12-c>

This approach could also be more widely adopted in the behavioral workforce to address employee retention.



Action Steps

State Level

Allocation of funds to regularly increase pay with COLA adjustments to salary schedules.

Organizational Level

Leadership can consider ways in which they can adjust worker schedules, including adding floating holidays, self-care PTO, and 32-hour work weeks. Managers must consider how scheduling and budgets are affected before implementing these changes.

²⁶Kilburn, M. R., Phillips, A., Gomez, C., Mariano, L. T., Doss, C. J., Troxel, W. M., Estes, K., & Morton, E. (2021). Does Four Equal Five? Implementation and Outcomes of the Four-Day School Week. Rand Corporation. https://www.rand.org/pubs/research_reports/RRA373-1.html

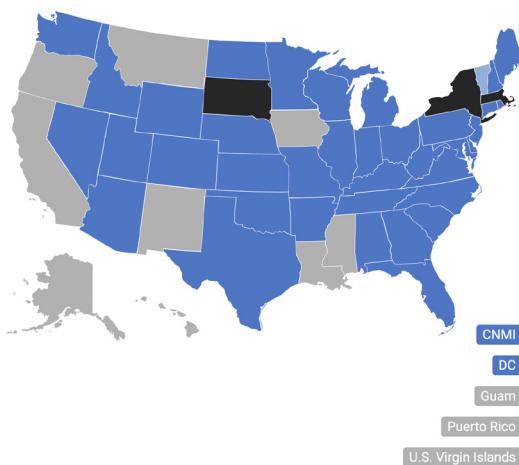


AREA OF FOCUS

PORATABILITY OF LICENSES AND CERTIFICATIONS

Licensure for the behavioral health workforce is regulated by state licensing boards. These boards set educational and practice requirements for behavioral health service delivery within state lines to protect the public and ensure patient safety²⁷ which typically include an education requirement, hours worked under supervision, and passing a licensure exam.

While the current system was created to provide oversight of behavioral health services, it limits transfer of licensure when practitioners move or change jobs across state lines. When each state has different licensure requirements and practitioners are required to navigate burdensome licensure processes, access to care is impacted for Americans seeking behavioral health services. This is particularly concerning in regions with low provider to patient ratios, such as rural, underserved, and diverse communities.²⁸



Recommendations

Interstate licensure compacts

Several states have joined interstate licensure compacts, which allow for behavioral health providers to practice across state lines within the other states that adopt the compacts.²⁹ One such compact, the PSYPACT, includes 40 states that have either adopted or enacted legislation to allow psychologists to practice telehealth and temporary in-person services in participating states.³⁰ Creation of similar compacts for other behavioral health licenses are needed to meet mental health service shortages across the country.

Reciprocity or endorsement to out-of-state providers

States can also offer reciprocity or endorsement of out-of-state licenses to allow for practice across state lines. Reciprocity is the process of recognizing licenses from other states, while endorsement grants licenses to providers that are licensed elsewhere and meet current state requirements.¹⁹ Along with endorsement, reciprocity allows a streamlined pathway for out-of-state

Map Key

- PSYPACT Participating State
- Enacted PSYPACT Legislation - practice under PSYPACT not permitted
- PSYPACT Legislation introduced

²⁷ U.S. Department of Health and Human Services. (2023, February 3). Licensure for behavioral health. telehealth.hhs.gov <https://telehealth.hhs.gov/licensure/licensure-for-behavioral-health>

²⁸ Washington Workforce Training and Education Coordinating Board. (2022). 2022 Behavioral Health Workforce Assessment: A report of the Behavioral Health Workforce Advisory Committee.

²⁹ National Conference of State Legislatures. (2022, May 20). State strategies to recruit and retain the Behavioral Health Workforce. <https://www.ncsl.org/health/state-strategies-to-recruit-and-retain-the-behavioral-health-workforce>

³⁰ Psychology interjurisdictional compact (PSYPACT). (n.d.). PSYPACT Map. <https://psypact.org/mpage/psypactmap>

providers to gain licensure within another state without needing to complete supervision or work hour requirements in the new state.

Modified telehealth licensure rules during COVID-19.

The COVID-19 pandemic saw a rise in telehealth service claims by 2,980% from September 2019 through September 2020.³¹ Demand for mental health care via telehealth has encouraged the rise in companies such as BetterHelp and Alma, providing access to mental health providers for clients who may otherwise not be able to seek care where they live. It also creates a solution in addressing workforce shortages in rural and underserved regions. During the COVID-19 public health emergency period, all 50 states were given emergency authority to waive licensing requirements for providers conducting telehealth services. As the emergency authority was lifted, some states have allowed these waivers to expire while others have passed legislation to make the waivers permanent.³² The lack of consistent telehealth regulations across states impacts the ability for behavioral health providers to work with clients who prefer or who solely have access to telehealth services over in-person treatment.

Streamlined Licensure Processes

Applying for licensure across state lines can be an expensive, time-consuming, and burdensome process for behavioral health providers. States can streamline this process by eliminating unnecessary steps for providers who already have licenses in other states. This may include waiving exam requirements if the provider has already passed the licensing exam in the past,

or offering immediate probationary licenses to providers who are fully licensed out-of-state while their paperwork is processed by the new licensing board.³³

Examples

Delaware, Reciprocity of licenses

Delaware offers reciprocity of licenses for clinical social workers to providers who have already passed the ASWB exam and hold a current clinical social work license in any other U.S. state or territory.³⁴

South Dakota, Licensure by Endorsement

South Dakota provides licensure by endorsement to out-of-state licensed counselors from other states or territories who have been licensed and actively practicing for at least three continuous years prior to applying for endorsement.³⁵

International Certification & Reciprocity Consortium (IC&RC), Reciprocity of certifications

Peer support is a growing area of the behavioral health field offering support to individuals and families receiving mental health and substance use disorder services. These peer specialists draw from their own lived experience to support clients navigating through treatment and recovery. To obtain a peer certification, candidates must complete field work, training, and certification through state boards. Obtaining these certifications provides a path for low barrier entry into the behavioral health profession as they typically do not require an advanced degree. Similar to licenses, each state has their own requirements

³¹ Gelburd, R. (2020, December 7). Telehealth claim lines rise 2980% in one-year period through September 2020. AJMC. <https://www.ajmc.com/view/telehealth-claim-lines-rise-2980-in-one-year-period-through-september-2020>

³² U.S. Department of Health and Human Services. (2023, May 11). Licensing across state lines. telehealth.hhs.gov <https://telehealth.hhs.gov/licensure/licensing-across-state-lines>

³³ Washington Workforce Training and Education Coordinating Board. (2022). 2022 Behavioral Health Workforce Assessment: A report of the Behavioral Health Workforce Advisory Committee. https://www.wtb.wa.gov/wp-content/uploads/2022/12/BHWAC-2022-report_FINAL.pdf

³⁴ Delaware Division of Professional Regulation. (n.d.). Clinical Social Worker Licensure. <https://dpr.delaware.gov/boards/socialworkers/newlicense/>

³⁵ South Dakota Legislature (2020). Codified Law 36-32-67. <https://sdlegislature.gov/Statutes/36-32-67>

³⁶ Mental Health America. (n.d.) How to become a Peer Support Specialist. <https://www.mhanational.org/how-become-peer-support-specialist>

for peer certifications.³⁶ The International Certification & Reciprocity Consortium (IC&RC) has created an agreement for member state certification boards to adhere to the minimum standards set forth by the IC&RC. IC&RC also offer international certification that offers reciprocity across member jurisdictions.³⁷

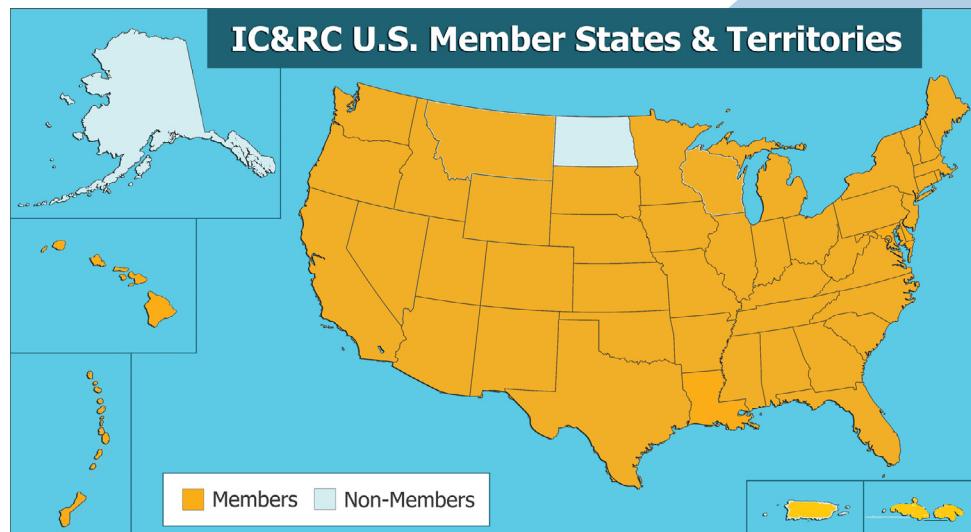
Certifications under the jurisdiction of the IC&RC include:

- Alcohol & Drug Counselor



Action Steps

State licensing boards of the various behavioral health fields can re-examine the licensing requirements placed on individual providers who wish to practice in their state. This could be particularly impactful for states with rural populations wishing to attract more providers to their mental health provider shortage areas.



³⁶ International Certification & Reciprocity Consortium (IC&RC). (n.d.) <https://internationalcredentialing.org/>

