

Infant-Early Childhood
Mental Health
Statewide Tour Report
*HCA's IECMH Priorities
and Next Steps*

Infant-Early Childhood Mental Health Statewide Tour Report – HCA’s IECMH Priorities and Action Steps

Background

Early life is critically important in shaping lifelong health and well-being. In alignment with its mission, HCA has increased its efforts to provide evidence-based, effective, and integrated care to infants, young children, and their caregivers, through the development of new policies and resources to support infant-early childhood mental health (IECMH) across Washington state.

In 2023, HCA’s IECMH team conducted a Statewide Tour of listening sessions with behavioral health providers, to understand barriers and potential solutions around improving access to quality IECMH services. Almost 100 providers from across the state shared their wisdom and perspectives through these listening sessions, and the key findings from these sessions are reflected in the [Statewide Tour Report](#) and [Executive Summary](#).

HCA’s IECMH Priorities

Provider perspectives are valuable in shaping ongoing work to build a strong IECMH system of care. The key topics, best practices, and challenges elevated by providers informed the following HCA IECMH priorities and strategies, which build on goals identified in [HCA’s Strategic Plan \(2022-2025\)](#).

Priority 1: Strengthen and support a diverse infant-early childhood mental health workforce.



- 1.1 Build mental health capacity to address IECMH needs of young children and their families, and improve high quality, equity informed IECMH services.
- 1.2 Use payment and contracting levers to support a diverse IECMH workforce that understands the needs of and has connections with the communities they are serving.
- 1.3 Explore pathways to expand IECMH services by optimizing a variety of service providers.
- 1.4 Develop partnerships for sustainable funding for IECMH workforce development.

Priority 2: Ensure equitable access to developmentally appropriate IECMH services for young children.



- 2.1 Ensure providers and organizations have the resources needed to implement high quality, developmentally appropriate IECMH services for young children.
- 2.2 Improve HCA program policies and processes to support IECMH best practices.
- 2.3 Enhance upstream approaches and strategies to strengthen IECMH promotion and prevention in Apple Health.
- 2.4 Actively seek to understand and remove systemic barriers to developmentally appropriate, evidence-informed care.

Priority 3: Build person- and community centered IECMH services and systems.



- 3.1 Engage with families of young children to help ensure HCA IECMH policies and programs reflect their needs and priorities.
- 3.2 Collaborate with Tribal and local governments, community-based organizations, health and social service providers, and stakeholders to reflect their priorities in our IECMH policies and programs.
- 3.3 Build feedback systems to enable HCA to analyze gaps, issues, and opportunities to understand how HCA and non-HCA systems create barriers.

Priority 4: Achieve value-based, sustainable IECMH care through aligned payments and systems.



- 4.1 Support development of tools and care delivery approaches that help providers succeed in delivering person-centered IECMH care.
- 4.2 Use data, evidence, and culturally appropriate standards in policies impacting young children.
- 4.3 Simplify and standardize payment and delivery reform implementation to reduce administrative burden for providers and families.
- 4.4 Explore and incorporate innovative payment approaches to finance comprehensive IECMH services that support prevention and early intervention activities.
- 4.5 Use purchasing power to drive improved outcomes for young children.

Priority 5: Strengthen cross-system alignment to achieve integrated whole person care for young children and their families.



- 5.1 Lead and/or support innovative community-wide solutions and technology to improve access to care and allow care coordination.
- 5.2 Work with state partners and Tribes to secure solutions that enhance young children and families' experience, build efficiencies across public programs, and provide better service delivery.
- 5.3 Align policies and programs to foster integrated, whole-person care that addresses physical health, behavioral health, and health-related social needs.

Washington's Infant-Early Childhood Mental Health (IECMH) system is complex and spans across different settings and sectors. [A table on page 5](#) highlights alignment between other Washington state plans to prioritize IECMH in the state.

HCA's Next Steps

Everyone has a role to play in addressing both the strengths and challenges shared by providers. Informed by these priorities, HCA is committed to taking action on the following next steps:






1. **Cross-agency Pregnancy, Infancy, & Early Childhood (PIE) collaboration:** Leverage cross-agency Pregnancy, Infancy, and Early Childhood (PIE) bi-monthly meetings to increase state agency coordination and clarify respective roles in supporting young children and their families. Using this collaborative space, identify opportunities to incorporate policies and programs that strengthen early childhood systems coordination. **(Priority 5)**
2. **Birth - five family therapy rates:** Utilize internal processes to propose increased family therapy reimbursement for young children to promote IECMH best practices for developmentally appropriate dyadic care. If approved, \$450,000 (\$225,000 general fund—state appropriation and \$225,000 general fund—Medicaid appropriation) will be needed to implement. **(Priority 2)**
3. **IECMH alternative payment model:** Following the state agency decision package process, HCA will draft a proposal to fund the design and piloting of an alternative payment model for IECMH treatment services. If approved, \$150,000 state funding will be needed to contract with alternative payment experts and \$500,000 to implement a pilot. **(Priority 4)**
4. **IECMH metrics:** Gather lessons learned from [Oregon's implementation of a system-level social-emotional health metric](#) to assess feasibility for Apple Health adoption. HCA IECMH team will share findings through the Prenatal to 5 Relational Health Subgroup of the [Children and Youth Behavioral Health Workgroup](#), including resources needed to support future implementation of similar approaches in Washington. **(Priority 4)**

5. **IECMH evidence-based practices:** Partner with [University of Washington’s Barnard Center for Infant and Early Childhood Mental Health](#) (Barnard) to launch a Child Parent Psychotherapy Learning Collaborative (CPP) by July 2024, including an implementation evaluation to support future approaches to sustainable IECMH specialty training. In addition to the training, the [Evidence Based Practices Institute](#) (EBPI) will offer EBP reporting support to address provider barriers and identify opportunities to strengthen EBP reporting **(Priority 1 & Priority 2)**
6. **Tribal partnerships:** Partner with HCA’s Office of Tribal Affairs (OTA) to strengthen partnership with through intentional and tailored communication and outreach to Tribal clinics and Indian Health Care Providers. **(Priority 3)**
7. **Family-driven IECMH priorities:** Develop and launch a plan for family-driven IECMH priorities by engaging with caregivers and families about their experiences accessing and receiving IECMH services, including partnering with HCA’s communications team to develop a family-focused communications strategy and assessing the need for additional resources to support this work. **(Priority 3)**
8. **Payment approaches for assessments in natural settings:** Explore different payment approaches informed by provider feedback to address barriers identified when providing mental health assessments for young children in home and community settings. **(Priority 2 & Priority 4)**
9. **IECMH-WC alignment:** Incorporate training needs and considerations into [IECMH-WC](#) activities for FY25 training and professional development supports. **(Priority 1)**
10. **IECMH Provider Spotlight series:** By July 2024, partner with providers and agencies from the IECMH Statewide Tour to host IECMH Provider Spotlight series during quarterly [IECMH Office Hours](#) reflecting topics identified during IECMH Statewide Tour, such as IECMH-specific intakes and updates to electronic health records (EHRs). **(Priority 3)**
11. **MHAYC longitudinal analysis:** Continue to partner with Department of Social and Health Services Research and Data Analysis (DSHS RDA) team on MHAYC evaluation and publish a report by July 2025 on the outcomes of evaluating existing administrative data to assess utilization of MHAYC components, such as multi-session assessment and sessions conducted in home and community settings, to inform updates to MHAYC policies. **(Priority 4)**
12. **Managed care partnerships:** Share feedback from IECMH Statewide Tour with managed care organizations (MCOs) and collaborate on potential solutions for increasing awareness of IECMH services and application of best practices. **(Priority 4)**
13. **IECMH referral pathways:** Partner with [Washington’s Mental Health Referral Service \(MHRS\)](#) and [Help Me Grow](#) to identify strategies to build IECMH referral options and strengthen families of young children’s awareness of their services. **(Priority 2)**
14. **Coordination across public programs:** Continue to participate in early childhood convenings, such as the [Early Childhood Courts](#) State Advisory Council, [Early Learning Coordination Plan](#) Impact Network, and [Washington State Communities for Children](#), and engage in collaborative efforts across public programs such as [Early Supports for Infants and Toddlers](#) (ESIT) and substance use disorder treatment for [pregnant and parenting women](#) (PPW). In participating, explore opportunities for leveraging partnerships to collect, align, and share data about IECMH needs, services, and outcomes across systems to inform policy and practice. **(Priority 5)**

Want to learn more? Read the [full report!](#)

Washington IECMH Priorities Comparison Table

Washington’s Infant-Early Childhood Mental Health (IECMH) system is complex and spans across different settings and sectors. Often IECMH programs and providers interact with several state and local government entities who also use different terms and approaches to their work. In recognition of this context, HCA partnered with [King County Best Starts for Kids](#), [Department of Children, Youth and Families \(DCYF\)](#), and Department of Health (DOH) to develop the following table showing alignment across our IECMH priorities. While each effort and plan may have held a unique population in mind, the priorities and outcomes have significant overlaps, as reflected in the comparison table below.

	HCA’s IECMH Priorities	King County IECMH Strategic Plan	Early Learning Coordination Plan	Early Childhood Comprehensive System Strategic Activities ¹
	Priority 1: Strengthen and support a diverse infant-early childhood mental health workforce	Priority 4: Support all direct service providers across the continuum of care	Outcome area 4: A Strong and supported early learning workforce	Health Care Provider Training and Technical Assistance
	Priority 2: Ensure equitable access to developmentally appropriate IECMH services for young children	Priority 2: Connect more families with services for IECMH, including promotion, prevention, and treatment	Outcome area 5: Healthy children and families	Health Care Practice Change
	Priority 3: Build person- and community centered IECMH systems.	Priority 1: Promote social and emotional well-being for all children and families.	Outcome area 2: Strong, stable, nurturing, safe, and supported families.	Equity and Engagement Coordinated Intake and Referral System: Help Me Grow
	Priority 4: Achieve value-based, sustainable IECMH care through aligned payments and systems.	Priority 3: Provide high-quality, culturally relevant services that meet the needs of families.	Outcome 3: Positive early learning experiences. ²	Early Childhood Systems Policy and Financing Health Care Systems Policy
	Priority 5: Strengthen cross-system alignment to achieve integrated whole person care for young children and their families.	Priority 5: Build and strengthen a network of IECMH services countywide.	Outcomes area 1: Powerful communities and a responsive early learning system.	Early Childhood Systems Coordination and Infrastructure

¹ Strategic activities form the Washington State ECCS Strategic Plan which identified opportunities for alignment with the ELCP.

² ELCP’s goals for positive early learning experiences focus on the growth and sustainable support for Washington state’s early learning system’s “mixed delivery system.” Though educationally focused, Outcome Area 3’s goals and strategies aimed at achieving access to affordable, inclusive, quality care aligns with HCA’s strategies for using payment and delivery systems to achieve quality, whole-person care.