

FACT SHEET

Perinatal Psychiatry Access Programs

MMHLA
Maternal Mental Health
Leadership Alliance

KEY POINTS

- > Maternal mental health (MMH) conditions are the most common complications of pregnancy and childbirth, affecting 1 in 5 women (800,000 women each year in the United States).¹⁻³
- > MMH conditions include depression, anxiety disorders, obsessive-compulsive disorder, post-traumatic stress disorder, bipolar illness (which may include psychotic symptoms), and substance use disorders.¹⁻³
- > Women will see a frontline healthcare provider (obstetric, pediatric, or primary care provider) 20-25 times during a routine pregnancy and first year of baby's life, providing ample opportunity for these providers to discuss and screen for MMH conditions.
- > Frontline healthcare providers, however, do not always have the training, knowledge, or resources to address MMH conditions, nor are they typically reimbursed for addressing MMH conditions.⁵
- > There are not enough psychiatric providers to care for women experiencing MMH conditions.⁵
- > Perinatal Psychiatry Access Programs provide **education, support, and resources** to help frontline healthcare providers address MMH, thereby **leveraging scarce psychiatric resources** to offer consultation and treat the most complex cases.⁵

1/5



women will experience MMH conditions during pregnancy or first year following pregnancy¹⁻³

75%

of women who experience MMH symptoms go untreated⁴



A woman will see a healthcare provider an average of 25 times during the two-year timeframe from conception to baby's first birthday

HOW PERINATAL PSYCHIATRY ACCESS PROGRAMS WORK

ACCESS PROGRAM STAFF TRAIN FRONTLINE PROVIDERS TO

- Screen women for MMH conditions
- Treat low-level anxiety or depression

FRONT LINE PROVIDERS CONTACT THE ACCESS PROGRAM FOR

- Consultation in more complex cases
- Resources and referrals for affected patients

PSYCHIATRISTS CAN PROVIDE FACE-TO-FACE CONSULTATION FOR THE MOST COMPLEX CASES

BUILDING CAPACITY

Perinatal Psychiatry Access Programs build the capacity of frontline providers to address MMH conditions through:



EDUCATION

Trainings and toolkits for providers and staff on evidence-based guidelines for screening, triage, and referral; risks and benefits of medications; and discussion of screening results and treatment options.



CONSULTATION

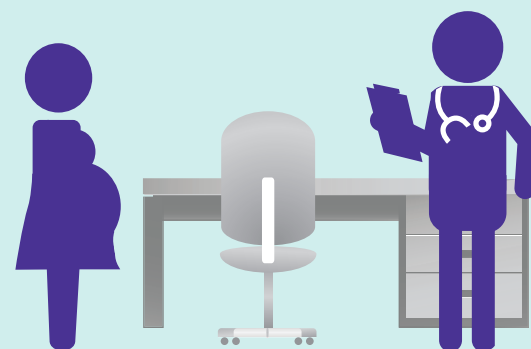
Real-time psychiatric consultation and care coordination for frontline providers serving pregnant and postpartum women including obstetricians, pediatricians, primary care physicians, and psychiatrists.






RESOURCES & REFERRALS

Linkages with community-based resources including mental healthcare, support groups, and other resources to support the wellness and mental health of pregnant and postpartum women.

Perinatal Psychiatry Access Programs address a critical public health issue through an innovative, creative, cost-effective approach to treat mental health in frontline healthcare settings.

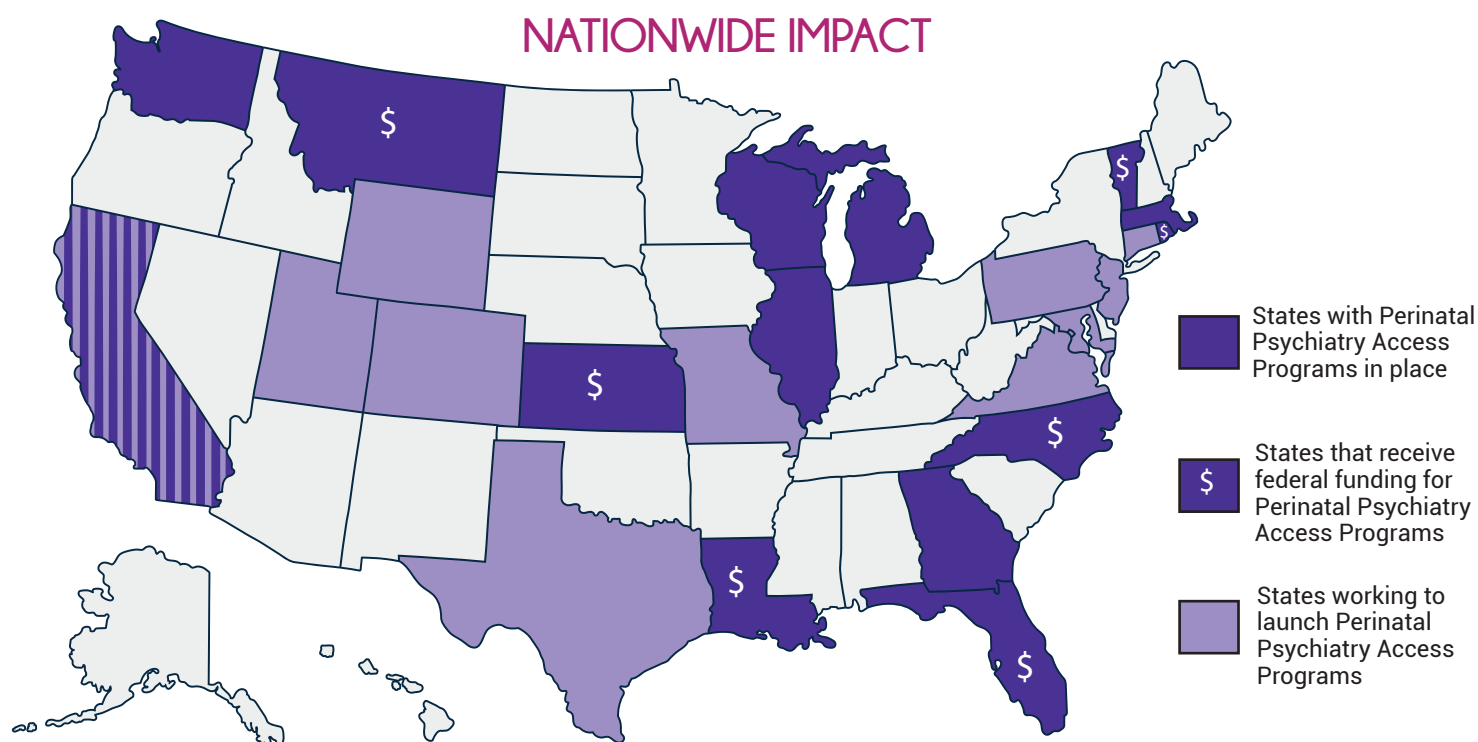


PSYCHIATRY ACCESS PROGRAMS & RESOURCES

	<p>MCPAP for Moms launched in 2014 as the first Perinatal Psychiatry Access Program in the U.S. MCPAP for Moms builds upon the successful Massachusetts Child Psychiatry Access Program (MCPAP), which leverages highly-trained psychiatrists to assist pediatricians in managing the mental health of their pediatric and adolescent patients.</p> <p>Learn more at mcpapformoms.org</p>
	<p>The Lifeline4Moms National Network of Perinatal Psychiatry Access Programs is a learning community that convenes Perinatal Psychiatry Access Programs from across the country to</p> <ul style="list-style-type: none"> • Evaluate, inform, and share best practices • Build community, engage stakeholders, evaluate programs, facilitate peer learning • Identify policies and funding to replicate cost-effective models <p>Learn more at umassmed.edu/lifeline4moms</p>
	<p>The Patient-Centered Outcomes Research Institute (PCORI) has launched a 3-year study to assess the effectiveness of Perinatal Psychiatry Access Programs. The study will assess which program components work best (training, consultation, resources and referrals). Results will be shared in scientific journals and at national webinars and meetings.</p> <p>Learn more at bit.ly/pcoristudy</p>

21st CENTURY CURES ACT

This federal legislation provides funding to states to create Psychiatry Access Programs based on the MCPAP model. In 2018, 30 states and the District of Columbia applied for funding for Perinatal Psychiatry Access Programs; 7 states were each awarded 5-year grants (totaling \$3.2 million per state over the lifetime of the program). An additional 18 states received funding to launch Child Psychiatry Access Programs, bringing the number of states with these programs to over 30.



Citations

- 1 ACOG Committee Opinion 757 (2018).
- 2 Gavin (2005). *Obstetrics & Gynecology*, 106, 1071-83.
- 3 Fawcett (2019). *Journal of Clinical Psychiatry* (80)

- 4 Byatt (2015). *Obstetrics & Gynecology*, 126(5): 1048-1058.
- 5 Byatt (2020). *Promoting the Health of Mothers & Children*