

Bridging Care: Mental Health and IDD

Overview

Individuals with dual diagnoses—co-occurring mental health conditions and intellectual/developmental disabilities (IDD)—face complex challenges requiring integrated, person-centered care. Research shows that 39% to 52% of individuals with developmental disabilities have co-occurring mental health conditions, with even higher rates among those on the autism spectrum. Traditional service systems and funding streams often operate separately, creating gaps in care and support.

Key Insights

1. High prevalence and complexity

- Up to half of individuals with developmental disabilities experience co-occurring mental health conditions.
- o Individuals often interact with multiple systems including education, child welfare, justice, and physical health.

2. Systemic divides and communication gaps

- Separate funding and service structures for IDD and mental health limit comprehensive care.
- Limited interoperability of electronic health records (EHRs) hinders coordinated support.

3. Person-centered, trauma-informed care is essential

o Tailored approaches improve outcomes and respect individual needs.

Current Challenges

- Fragmented service delivery and funding between mental health and IDD systems
- Insufficient provider training on dual diagnoses and co-occurring conditions
- Limited data sharing and EHR interoperability across systems
- Difficulty coordinating care among multiple agencies and providers
- Families navigating complex, overlapping systems without clear leadership or communication

Advancements & Innovations

- States are fostering partnerships between mental health and IDD divisions to close service gaps
- Expanded education and training for crisis services, managed care organizations, and frontline providers
- Inclusion of individuals with lived experience and families in program design and policy development
- Crisis services adapting to better meet the unique needs of individuals with dual diagnoses

Strategies for States & Payers

1. Enhance communication and data sharing

 Streamline data sharing and improve inoperability between mental health and IDD systems.

2. Engage stakeholders

 Conduct targeted stakeholder engagement to understand community needs and build trust.

3. Expand cross-system training

o Focus on trauma-informed, person-centered care approaches.

4. Clarify roles and coordination

Define leadership responsibilities across agencies to reduce confusion.

5. Support provider infrastructure

Invest in technology and care coordination resources to build capacity.

Why This Matters

Addressing the needs of individuals with dual diagnoses improves health outcomes, reduces service fragmentation, and supports families navigating complex systems. Integrated, collaborative approaches foster sustainable, high-quality care that respects the whole person and promotes long-term recovery and well-being.

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For More Information

For tailored support and strategic guidance on advancing behavioral health initiatives for children and youth, contact Eva Velez or Dr. Jason Vogler, or email us at: mercer.government@mercer.com.

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