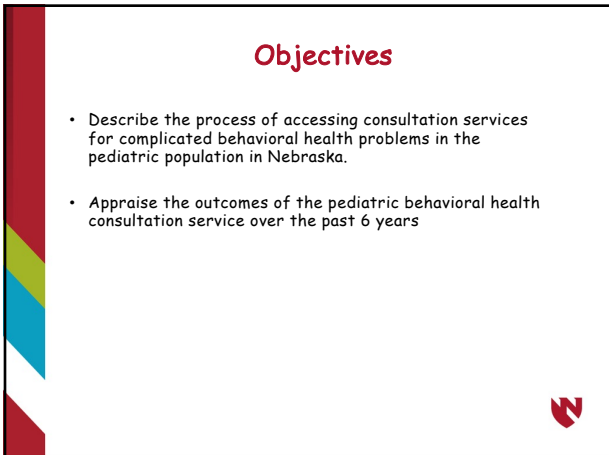


Nebraska Pediatric Mental Health Care Access Program

Nebraska Nurse Practitioner Webinar
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June 10, 2026

University of Nebraska Medical Center
MUNROE-MEYER INSTITUTE

1



Objectives

- Describe the process of accessing consultation services for complicated behavioral health problems in the pediatric population in Nebraska.
- Appraise the outcomes of the pediatric behavioral health consultation service over the past 6 years

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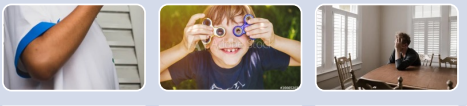


Mental Health Prevalence in Children



3

Most Common Disorders



Anxiety

ADHD
Impulse control
ODD

Mood
Disorders



4

Diagnosis Missed



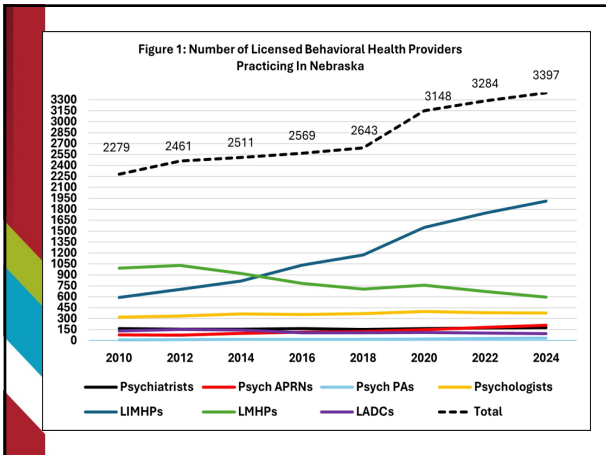
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NE Behavioral Workforce Shortage (BHECN/DHHS, 2025)

- 24 Nebraska counties without Behavioral Health providers
- From 2010 to 2024, the number of licensed behavioral health providers in the state grew from 2,279 to 3,397 – a 49% increase.
- The fastest-growing roles were psychiatric physician assistants (up 267%) licensed independent mental health practitioners (up 225%) and psychiatric nurse practitioners (up 168%).
- Children and Adolescents
 - 25% have behavioral health disorder & 15% found it difficult or impossible to receive needed behavioral health care.
 - Shortages of clinicians trained in early childhood mental health and trauma-informed care
 - Long wait lists and fragmented health systems



6



7

Nebraska Initiative

Nebraska Partnership for Mental Healthcare Access in Pediatrics (NEP-MAP) (DHHS & MCHB, 2019)

8

Nebraska Partnership for Mental Healthcare Access in Pediatrics (NEP MAP)

- In 2019, 5-year, \$2.2 million HRSA grant through maternal and child health bureau
- Grant extended until 2028
- Designed to improve timely access to behavioral healthcare for children in rural Nebraska
- The main goal is to provide primary care providers access to behavioral health supports

9

Access to Care for Child and Adolescent Behavioral Health

NEP-MAP Mission

- Collaborate to develop, advise, and advocate for programs that advance the mental health of Nebraska children 0-21 years old.
- Supports professionals in pediatric, emergency department, and school settings by...
 - Increasing access and availability of pediatric mental health consultation teams so professionals can provide children the care they need.
 - Conducting training and offering technical assistance.
 - Promoting care coordination support services to promote early identification, diagnosis, and treatment of behavioral health conditions.
 - Improving access to treatment and referral services for children and adolescents with identified behavioral health conditions.

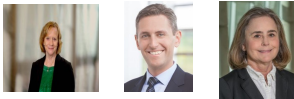


10

Tele-Behavioral Health Consultation Service

UNMC Tele-Behavioral Health Consultation Team (TBHC)

- Provides mental health care support to primary care providers in Nebraska managing patients with behavioral health problems.
- Includes individuals who are providing services to children, adolescents and young adults through age 21.
- Offer guidance on diagnosis, medications, and psychotherapy interventions to assist primary care providers in better managing patients in their practices.
- Support is available through phone and synchronous audio/video teleconference consultations to referring primary care providers.



11

Primary Care Providers (PCPs)

- PCPs can request a consultation three ways:

1) Visit our website:

<https://www.unmc.edu/mmi/services/psychology/teleproviderconsult.html>

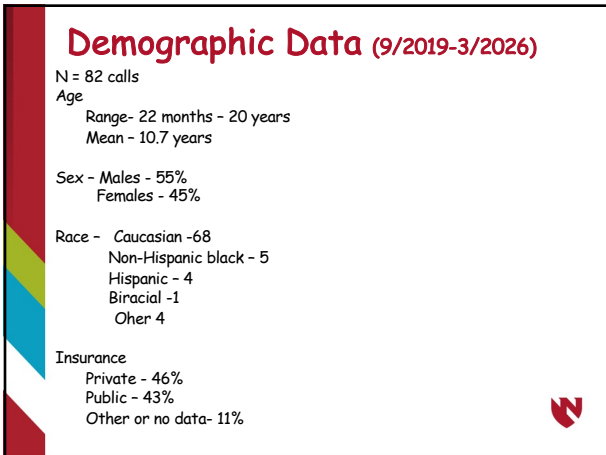
2) QR Code



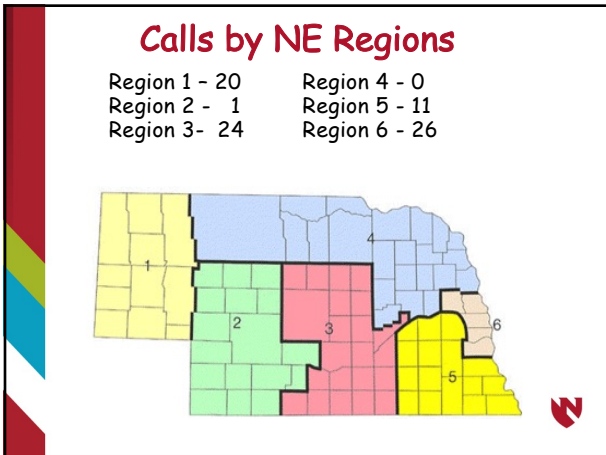
3) Call 402-559-3838



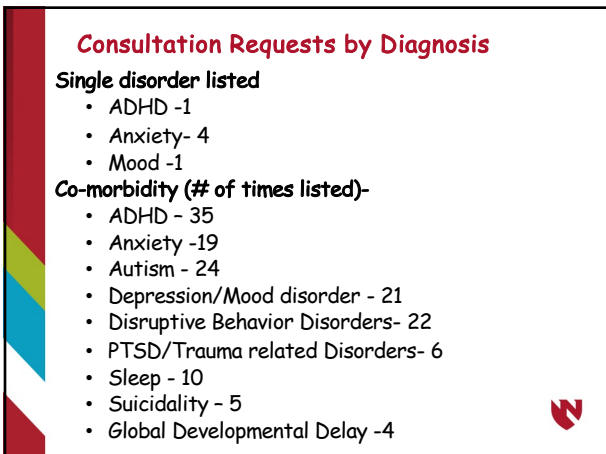
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13



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15

Consultation Outcomes

(Most all recommendations entailed more than one intervention)

Medication:

- No changes - 8
- Change dose on current medication(s) - 18
- Change medication - 19
- Add another medication - 27
- Discontinue medication - 2

Non-Medication:

- Anticipatory guidance in behavioral interventions -9
- Referral to a higher level of care/specialized services - 16



16

Satisfaction

- Satisfaction surveys - 25/82 (30.5%)
 - Efficient & user-friendly - 4.86
 - More confident in care - 4.9
 - Reduced need for higher care 4.83
 - Rating Average 4.8/5

(1= Strongly disagree ; 5 = Strongly agree)



17

Qualitative Satisfaction Data

"Wonderful interaction to know next steps for my patients".

"Increased my knowledge and comfort level w/ pediatric psych med prescribing and reinforced my initial eval and treatment efforts."

"I have used the service several times and always walk away with increased knowledge and improved confidence to provide my patients with outstanding care."

"All of the providers are fantastic. I've spoken to each one, and they've all been so helpful. This is a wonderful service!"

"I couldn't be happier that it exists. I now think of it first when I have psychiatric questions."



18

Barriers to Consultation Services

- Providers may lack knowledge of the service
- Providers may not remember the service availability
- Providers seeking out services through other means
- Other???



19

Typical Case Consultation

Teen male with hx of Major Depressive Disorder and passive suicidal ideations (determined to not need hospitalizations). Suicide Screening - does not want to die, no plan or intent, but feels like things (friends and family relationships aren't getting better). He is beginning to feel hopeless. Struggling with academics at school - not motivated to do the work.

Past medications - Fluoxetine 40 mg - previously worked but then lost effectiveness
Escitalopram 20 mg daily (not helpful)

Questions by Provider

- Reconfirm safety
- Consider substance use
- What is the nature of the relationship difficulties?
- When did the academic struggles start?
- Concern of anxiety or other comorbidity?
- Explore past medication.
- Is he receiving therapy? What kind of therapy? Interpersonal therapy maybe needed
- Medications: Consider switching to SNRI (duloxetine) or consider back to Prozac and increase to higher dose (60 mg)
- Follow up as needed



20

QUESTIONS



21
