**Draft System Characteristics for the Massachusetts Behavioral Health System**

A high-performing behavioral health system will be integrated with the medical health system to deliver appropriate access to the right care, at the right time and in the right place across the full continuum of care (starting with prevention). The system should be patient-centered, age appropriate and consist of culturally competent care. Behavioral health needs and treatments are diverse, so there should be ‘no wrong door’ to access appropriate care.

In general, access to diagnosis and treatment of behavioral health and physical health conditions should be similar; any differences should be evidence-based, and avoid implementing or reinforcing unnecessary distinctions. A well-trained workforce of both behavioral health specialists and other medical professionals should deliver evidence-based care, coordinated and supported by tools such as an interoperable electronic health record. Adult and pediatric patient’s families should be involved in care decisions and information sharing where appropriate (e.g. with the adult patient’s informed consent).

The system should be of sufficient capacity to ensure that there is adequate diversionary care and no emergency-room boarding, and that children and adults are able to flow through the system and access different levels of care as needed, without undue waits, and well-informed as to how, where and when to access care. Payment for these services should be fair and reasonable to allow for sustained capacity, and should include incentives for providers to work together to provide effective care towards maximizing patient outcomes and experience.