Sustaining Integrated Care for Persons with Serious Behavioral Health Conditions

March 17, 2017 Portland, Oregon



Introductions

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Turn to your neighbor and introduce yourself!



Your Event Hosts

Oregon Health Authority's Transformation Center

 The Transformation Center is the hub for innovation and quality improvement for Oregon's health system transformation efforts to achieve better health, better care and lower costs for all.

Patient-Centered Primary Care Institute

 Makes technical assistance and resources available to primary care practices working on Patient-Centered Primary Care Homes



Today's Objectives

- Understand the current landscape of integrated care for persons with serious behavioral health conditions, both in Oregon and nationally.
- Understand and discuss key drivers for quality outcomes and sustainability for integrated behavioral health care.
- Identify and share promising practices and lessons learned



Today's Agenda



8:00am

Welcome from Oregon Health Authority



12:15pm

Next Generation Integrated Care Funding Models



8:15am

Review and Update on Key Initiatives



1:45pm

Break - Transition to PM Breakout Sessions



8:45am

Networking and Deeper Dive into Initiatives



2:00pm

PM Breakout Sessions



10:00am

Break – Transition to AM Breakout Sessions



3:15pm

Break - head back to Ballroom



10:15am

AM Breakout Sessions



3:30pm

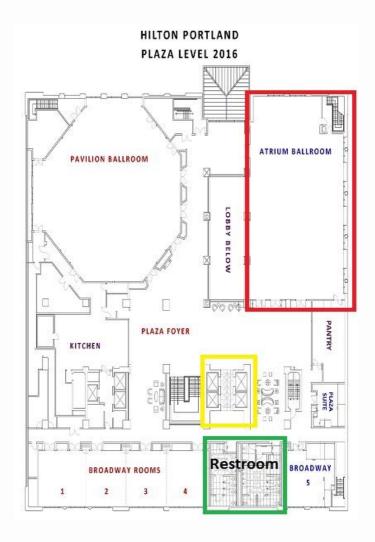
Offers, Requests and Commitments



What's in your folder?

- Agenda
- Networking & Deeper Dives into Initiatives
 Table Topic List
- Breakout Session Descriptions & Presenter Bios
- Institute's Behavioral Health Integration Resource Library Info Sheet
- Labels for Offers, Requests & Commitments
- Evaluation thorough & candid feedback
 is encouraged!

Housekeeping

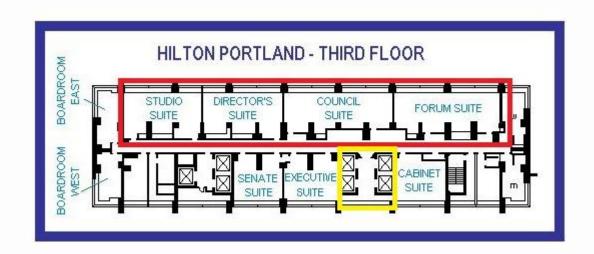


- ✓ Restrooms
- √ Phone calls
- ✓ Materials available online at: www.oregon.gov/oha/Transformation-Center/Pages/Behavioral-Health-Integration.aspx
- ✓ We will be sharing a list of attendee's information with registrants
- ✓ We will be taking pictures



Housekeeping

- ✓ If you need to leave early fill out an evaluation and give to volunteer
- ✓ Breakout sessions are on the 3rd floor take the elevators
 - If the room is full, go to a different session





Stand Up if You...

- Are attending from outside of the Portland Metro area
- Work primarily in a behavioral or mental health clinic
- Work in a primary care or physical healthcare clinic
- Are part of an educational institution
- Are representing a patient or consumer advocacy group
- Are representing a professional association/coalition
- Are from a payer (health plan/CCO, etc.)
- Are with the OHA



Thank You!

Please stand if you...

- Are a volunteer today
 - these people can help
- Are a Deeper Dives into Initiatives Table Facilitator
- Are a Breakout Session Presenter
- Were on the Planning Group for this event



Review and Update on Key Initiatives



2015 Behavioral Health Town Halls

613 people attended, approximately 550 consumers

What we heard – two themes emerged

Systemic Challenges

- Need for improved access to services
- Lack of certain services
- Lack of coordination among providers, schools, police, etc.
- Administrative complexity

Holistic Supports Needed

- Housing
- Employment
- Transportation



BHC Recommendations Overview

Recommendations will transform behavioral health system so that all Oregonians (both Medicaid and non-Medicaid) will be served by a coordinated care model for behavioral health needs.

- Person & family centered
- Fully integrated behavioral health with physical and oral health
- Build on existing efforts and complement not duplicate
- Reduce administrative burden and system complexity
- Shared financial risk
- Outcomes that are measurable & sustainable





BHC Implementation Plan

 Phase 1: BHC completed and recommendations approved January 31st and then released March 15th, 2017

 Phase 2: Develop and implement work groups and governance plan (accountability structure)

Phase 3: Begin implementation of prioritized recommendations



CCBHC Planning Grant and Demonstration Program

2015-2016 SAMHSA Planning Grant Phase

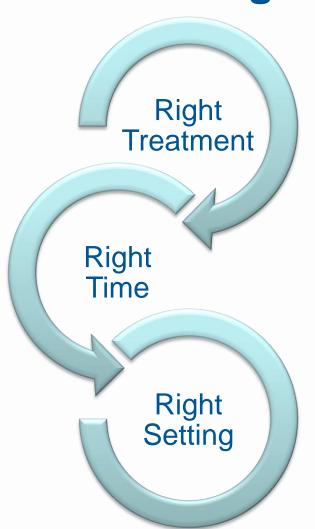
- Developed a Prospective Payment System (PPS)
- Tested data systems to ensure accurate reporting on required metrics
- Federal criteria and state standards to certify up to 30 CCBHCs in Oregon

2017-2019 SAMHSA Demonstration Grant Phase

- Demonstration Program launching April 1, 2017
- Participation from 12 organizations representing urban, rural, and frontier communities
- Federal and state requirements address staffing, access, care coordination, scope of services, quality reporting and governance



US Department of Justice/Oregon Health Authority Oregon Performance Plan



Adults 18 and over experiencing severe and persistent mental illness

- Improve transitions of people to integrated settings from higher levels of care.
- Increase number of people who are supported in the community, and avoid incarceration and unnecessary hospitalization.
- Expand services and supports that enable people to live successfully integrated into the community.



What the plan covers:

Increase Community Integrated Treatment

- Crisis Services (Mobile Crisis)
- Assertive Community Treatment (ACT)
- Supported Housing
- Peer Delivered Services
- Supported Employment
- Criminal Justice Diversion

Decrease Institutional Care

- Secure Residential Treatment Facilities
- Emergency Departments
- Acute Psychiatric Care
- Oregon State Hospital (OSH)



Legislative Session 2017

- Suicide related visits to hospitals: SB 833, HB 3090, HB 3091
- Improve process for committing folks to OSH for restorative services: HB 2306, 2307, 2308, 2309, 2627, 2631, SB 132
- ED psychiatric boarding: SB 816, OHA report to Ways and Means
- Mental Health Drug Carve-In: HB 2300
- Continuing Education for providers: SB 48, SB 50
- Peer Support Specialists: HB 2304
- OHA Governor's Budget: HB 5026





OHA Support for CCOs and Providers

Support for integration at the system and provider levels through OHA's Transformation Center has included:

- Developing measures to evaluate level of behavioral health integration
- Supporting behavioral health organization clinical leadership
- Assessing primary care readiness for behavioral health integration
- Reducing and removing barriers to behavioral health integration
- Integrating behavioral health into pediatric practices
- Developing workflows for integrated primary care
- Supporting value-based payments for integrated care
- Training on trauma informed care for CCO staff, providers and clinic staff
- Telehealth for behavioral health



Networking and Deeper Dive into Initiatives



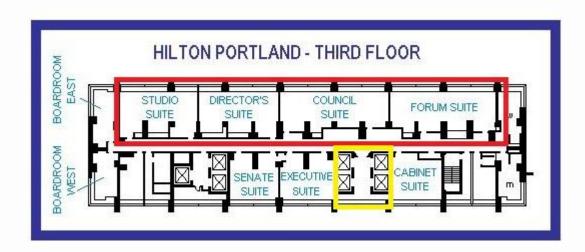


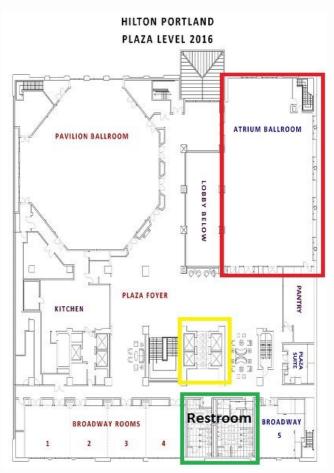
Each table has a number...

- Please head to the table with the number that corresponds to the topic you're interested in hearing more about
- Each table has an expert facilitator to speak about this topic
- If the table is full, please choose a different table
- You will have 20 minutes to hear about this topic and ask questions/discuss
- There will then be five minutes to switch to a new table
- Four rounds = four tables
- Feel free to network during the time to switch tables
- Have fun!



15 min. Break – Please head to Breakout Sessions (see agenda for room)







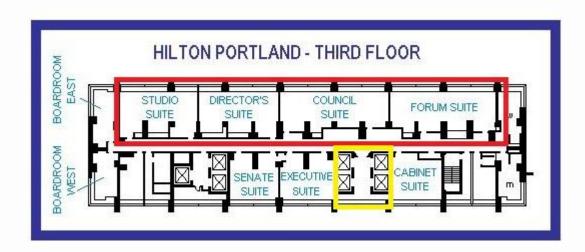
Lunch!

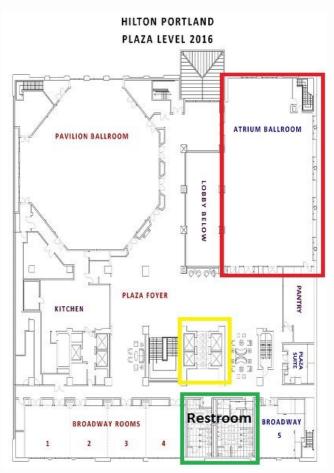


Session will start again at 12:15pm



15 min. Break – Please head to Breakout Sessions (see agenda for room)







Offers, Requests and Commitments

- Offers: Something you can share with those that may be interested (a program, information, etc.)
- Requests: Any requests from others in the room to help them and/or their organization to act upon today's learnings/discussions
- Commitments: What you are going to do to act upon today's learnings/discussions, or help with another's request
- Labels in the folder with your name on them
- 10 minutes to write each one on the proper label
- 30 minutes for participants to share what's on their labels
- Volunteers will help put labels up

Please fill out the evaluation completely before leaving!

Thank you for participating!