

## Behavioral Health CCO 2.0 Policy Development Proposed Work Plan

### Background

In September 2017, Governor Brown asked the Oregon Health Policy Board (OHPB) to focus on behavioral health when considering the future of Coordinated Care Organizations (CCOs). The Governor's request included the following:

1. Reduce emergency department utilization;
2. Increase access to community based behavioral health care; and
3. Children with behavioral health needs are a priority.

The OHPB, other state committees, and the Oregon Health Authority (OHA) currently have the following initiatives to address behavioral health challenges:

- **Behavioral Health Collaborative** developed recommendations to improve Oregon's behavioral health system with specific recommendations for governance, finance, standards of care, workforce, data, and health information technology. OHA is in the implementation phase of these recommendations, including:
  - Completing a needs based assessment of the **behavioral health workforce**, including licensed and unlicensed providers. The needs based assessment will include a report analyzing Oregon's behavioral health workforce data and recommending a recruitment and retention strategy. This work will be completed by March 31, 2019.
  - Developing standards for behavioral health providers in integrated care settings
  - Statewide standardized risk assessment
  - Standards for peer delivered services
  - CCO incentive metrics
  - EHR and HIT recommendations
- **Oregon Performance Plan** focuses on adults with severe and persistent mental illness (SPMI). Areas of focus include expanding mobile crisis services, access to Assertive Community Treatment (ACT) teams, increasing peer delivered services and increasing access to housing and employment services.
- Oregon is one of eight states participating in the **Certified Community Behavioral Health Clinic (CCBHC)** demonstration program. This program incentivizes clinics to provide 24 hour access to comprehensive, evidence-based mental health care services. Quarter-way surveys have revealed that these appropriately financed programs increase access to behavioral health services, expand capacity and increase numbers of qualified staff who can offer evidence-based, trauma –informed services.

### Definitions

**Behavioral Health (BH):** Mental health and addictive disorders such as problem gambling and/or substance use disorders.

**Mental Health Parity:** The Mental Health Parity and Addiction Equity Act (MHPAEA) of 2008 requires insurance to provide the same level of benefits for behavioral health as they do for medical/surgical care. The application of this Act to Medicaid benefits is described in CFR 2333-F.

- Oregon was awarded the **Opioid State Targeted Response Grant** in May 2017. The treatment and recovery focused grant award is 6.5 million per year for up to two years. Oregon is partnering with other government agencies and stakeholders to enhance and expand existing efforts around opioids, including the Oregon Health and Sciences University (OHSU), The Oregon Department of Corrections (ODOC), HIV Alliance, the counties, Oregon Treatment Center, Yamhill County Jail and day treatment providers across the state.
- OHA and the Department of Business and Consumer Services (DCBS) staff participated in a federal Substance Abuse and Mental Health Services Administration (SAMHSA) policy academy on **mental health parity**. DCBS was awarded a million dollar grant and funding from the Oregon legislature to enforce parity. OHA and DCBS staff continue to meet regularly to address barriers and challenges to parity enforcement.
- OHA has recently implemented **Psychiatric Emergency Services** (PES), currently being delivered at Unity in Portland. This service is delivered in a setting especially designed to handle all levels of behavioral health crises. It relieves the waiting and boarding times that individuals experience in a traditional emergency room, delivers behavioral crisis services in an a more effective and trauma-informed environment, while reducing costs .

**Behavioral Health Topic Area Team**

OHA has convened an internal Behavioral Health CCO 2.0 team with members from Health Policy and Analytics (HPA) and Health Systems Division (HSD). Members were invited to participate based on their particular subject matter expertise to develop a comprehensive and integrated behavioral health plan.

Lead	Royce Bowlin, HPA Behavioral Health Director
Project management and policy lead staff	Jackie Fabrick, HPA Behavioral Health team
Policy Unit Liaison	Lori Kelley, HPA Policy Team Manager
Subject Matter Experts	Mike Morris, HPA Behavioral Health Administrator Chelsea Holcomb, HSD Child, Adolescent and Family Behavioral Health Services Manager Nicole Corbin, Adult Behavioral Health Services Manager Lea Forsman, HSD Behavioral Health Operations and Policy Analyst
Health Systems Division Lead	Chris Norman, HSD Director Integrated Health Programs
Additional Experts	Jon Collins, HPA Director of Health Analytics Chelsea Guest, HPA Manager Actuarial Services

**CCO 2.0 questions for 2018 investigation and policy options associated with each question:**

Questions	Policy Options
How will we measure integration?	<b>#1</b> Integration of behavioral healthcare: 1) Establish definition of integration, 2) Identify metrics to track milestones of integration, 3) Identify expected outcomes and measure.
	<b>#2</b> Electronic Health Record (EHR) and Health Information Technology (HIT) to improve integration.
How can OHA encourage CCOs to invest and support behavioral health and hold CCOs accountable for these investments?	<b>#3</b> Behavioral Health Home recognition program
	<b>#4</b> Address billing barriers between physical health and behavioral health
	<b>#5</b> Align CCO procurement process and contracting with Oregon Performance Plan (OPP), Behavioral Health Collaborative (BHC), Medicaid Waiver
	<b>#6</b> Care Coordination Standards
	<b>#7</b> Direct service providers are using evidence based practices and emerging practices
How can we work with the CCOs to ensure that the system has the workforce needed to achieve expected outcomes?	<b>#8</b> Identify options available to pay for use of evidence based practices
	<b>#9</b> Identify cultural best practices to ensure access to cultural specific programs  The Behavioral Health Collaborative has workforce efforts underway to address workforce shortages (see page 1). This work is being coordinated with OHPB Healthcare Workforce Committee.
What strategies should OHA take to ensure CCOs provide a children’s BH continuum of care to achieve expected outcomes?	<b>#10</b> Ensure access to a behavioral health continuum of care across the lifespan
	<b>#11</b> Ensure there are ample incentives and opportunities to work across systems
	<b>#12</b> Ensure there is a children’s behavioral health system to achieve measurable symptom reduction
	<b>#13</b> Ensure special populations, prioritizing children in Foster Care, have their physical and behavioral health needs met by CCO and system of care

**Opportunities for public input on behavioral health policy options:**

Date	Stakeholder Engagement Opportunity	Policy Options Considered												
		1	2	3	4	5	6	7	8	9	10	11	12	13
3/15-4/15	Online survey on overall CCO 2.0 process, available on OHPB webpage	X	X	X	X	X	X	X	X	X	X	X	X	X
3/9	Addictions and Mental Health Planning and Advisory Council (AMHPAC)	X	X	X		X	X	X	X	X	X	X	X	X

Date	Stakeholder Engagement Opportunity	Policy Options Considered												
		1	2	3	4	5	6	7	8	9	10	11	12	13
4/11	Oregon Consumer Advisory Council (OCAC)	X		X			X	X	X		X		X	X
4/12	Health Plan Quality Metrics Committee (HPQMC)	X												
4/13	Oregon Alliance of Children's Programs (OACP)	X						X	X		X	X	X	X
4/19	Primary Care Payment Reform Collaborative				X									X
4/23	Traditional Health Workers Commission (THW)									X	X	X	X	X
4/25	Medicaid Advisory Committee (MAC)										X	X	X	X
4/27	Children's System Advisory Council (CSAC)	X					X	X	X		X	X	X	X
TBD	Association of Oregon County Mental Health Programs (AOCMHP)	X	X	X		X	X	X	X		X	X	X	X
TBD	Health Information Technology Oversight Council (HITOC)		X											
TBD	Oregon Association of Hospitals and Health Systems (OAHS) Behavioral Health Committee	X									X	X	X	X
TBD	National Alliance on Mental Illness (NAMI)	X	X	X	X	X	X	X	X	X	X	X	X	X
TBD	Oregon Prevention Education Recovery Association (OPERA)	X	X	X			X	X	X		X	X		
TBD	Oregon Residential Provider Association (ORPA)	X				X		X	X		X	X		
TBD	Health Equity Committee									X				

### 2018 CCO 2.0 work plan development process

At the January 2018 Oregon Health Policy Board retreat, OHPB members provided feedback on the overarching questions for investigation in 2018. These questions provide the overarching foundation for what to explore in order to improve CCOs in the future. Using these questions as a guide, OHA staff gathered existing recommendations from reports, evaluations and committees and researched best practices and innovative ideas within these topic areas in order to identify policy options that should be examined and discussed further. The work plans below list the steps that will be taken to build towards potential policy recommendations for review by the OHPB, including additional research needed, timelines and opportunities for expert and public input.

The behavioral health work plan begins on the next page.

<b>Question #1: How will we measure integration?</b>			
<b>Policy Option 1: Integration of behavioral healthcare 1) Establish definition of integration; 2) Identify metrics to track milestones of integration; 3) Identify expected outcomes and measure.</b>			
<b>Key next steps</b>	<b>Completion date</b>	<b>Link with other topic areas</b>	<b>Comments</b>
Research national recommendations and what other states are doing.	March 12, 2018	SDOH/E, VPB	Connect with Health Policy on definition, including Oral Health Trauma informed approach to care using health equity lens
Summarize national recommendations, OHA Subject Matter Expert (SME) review	March 12, 2018		
Identify metrics based on recommendations and available data streams and recommend to HPQMC	March 21, 2018	VBP	
Adopt definition of integrated care	March 21, 2018	VBP, Cost, SDOH/E	
Develop operationalized outcome measures	March 21, 2018		
Develop policy briefing and presentation materials for committee and public input.	April 2, 2018		
Committee engagement and input	May 10, 2018		
Incorporate committee and public survey feedback into final recommendations for leadership	May 4, 2018		
Finalize draft recommendations for OHPB	May 25, 2018		
<b>Policy Option 2: Electronic Health Record (EHR) and Health Information Technology (HIT) to improve integration.</b>			
<b>Key Next Steps</b>	<b>Completion Date</b>	<b>Link with other topic areas</b>	<b>Comments</b>
Review OHIT/HITOC work plan	March 11, 2018	VBP	
Review EHR survey results and recommendations	March 12, 2018		
Develop policy briefing and presentation materials for committee and public input	April 2, 2018		
Committee engagement and input	May 10, 2018		
Incorporate committee and public survey feedback into final recommendations for leadership	May 4, 2018		
Finalize draft recommendations for OHPB	May 25, 2018		
<b>Question 2: How can OHA encourage CCOs to invest and support behavioral health and hold CCOs accountable for these investments?</b>			
<b>Policy Option 3: Behavioral Health Home recognition program</b>			

Key Next Steps	Completion Date	Link with other topic areas	Comments
Research options for implementation	March 30, 2018	Cost, VBP	HB 4018
Develop policy briefing and presentation materials for committee and public input	April 2, 2018		
Committee engagement and input	May 10, 2018		
Incorporate committee and public survey feedback into final recommendations for leadership	May 4, 2018		
Finalize draft recommendations for OHPB	May 25, 2018		
<b>Policy Option 4: Address billing barriers between physical health and behavioral health</b>			
Key Next Steps	Completion Date	Link with other topic areas	Comments
Research how are other states addressing; what are federal and state barriers, review Primary Care Payment reform Collaborative work plan and recommendations	March 30, 2018	VBP, Cost	Integrated health unit has worked on the codes
Develop policy briefing and presentation materials for committee and public input.	April 2, 2018	VBP, Cost	Integrated health unit has worked on the codes
Committee engagement and input	April 30, 2018	VBP, Cost	Integrated health unit has worked on the codes
Incorporate committee and public survey feedback into final recommendations for leadership	May 4, 2018	VBP, Cost	Integrated health unit has worked on the codes
Finalize draft recommendations for OHPB	May 25, 2018	VBP, Cost	Integrated health unit has worked on the codes
<b>Policy Option 5: Align CCO procurement process and contracting with Oregon Performance Plan (OPP), Behavioral Health Collaborative (BHC), Medicaid Waiver</b>			
Key Next Steps	Completion Date	Link with other topic areas	Comments
Review current CCO contract and identify what needs to be enforced and what needs to be added.	March 9, 2018		
Transfer mental health residential benefit to CCOs	TBD	VBP, Cost	Will align with waiver
Transfer risk for waitlist to CCOs	January 1, 2019	VBP, Cost	
Transfer risk for civil commitment patient at OSH	January 1, 2020	VBP, Cost	
Develop proposal for what needs to be added to CCO contracts	March 23, 2018		
Develop enforcement plan	March 30, 2018	VBP, SDOH/E, Cost	Other TATs will also be addressing this.
Oregon Performance Plan language for contracts	March 30, 2018		

Develop policy briefing and presentation materials for committee and public input.	April 2, 2018		
Committee engagement and input	May 10, 2018		
Incorporate committee and public survey feedback into final recommendations for leadership	May 4, 2018		
Finalize draft recommendations for OHPB	May 25, 2018		
<b>Policy Option 6: Care Coordination Standards</b>			
<b>Key Next Steps</b>	<b>Completion Date</b>	<b>Link with other topic areas</b>	<b>Comments</b>
Review current CCO contracts and OARs to identify what is currently in contract.	March 11, 2018		Will link to enforcement Defined by Department of Consumer and Business Services (DCBS) in OAR Required by HB 3091
Review: PCPCH and CCBHC care coordination standards, national and other states standards and best practices	March 11, 2018		PCPCH is building model – has care plans and will send For children please include Care Coordination Standards from NWI pertaining to Wraparound and/or standards from national organizations
Research national and other state care coordination standards	March 11, 2018		
Develop policy briefing and presentation materials for committee and public input.	April 2, 2018		Must include gaps in contracts and OARs vs what is already included but not enforced.
Committee engagement and input	May 10, 2018		
Incorporate committee and public survey feedback into final recommendations for leadership	May 4, 2018		
Finalize draft recommendations for OHPB	May 25, 2018		
<b>Question 3: How can we work with the CCOs to ensure that the system has the workforce needed to achieve expected outcomes?</b>			
<b>Policy Option 7: Identify cultural best practices to ensure access to cultural specific programs</b>			
<b>Key Next Steps</b>	<b>Completion Date</b>	<b>Link with other topic areas</b>	<b>Comments</b>
OEI and BH Policy develop work plan	March 1, 2018	SDOH/E	
Develop policy briefing and presentation materials for committee and public input.	April 2, 2018	SDOH/E	
Committee engagement and input	May 10, 2018	SDOH/E	

Incorporate committee and public survey feedback into final recommendations for leadership	May 4, 2018	SDOH/E	
Finalize draft recommendations for OHPB	May 25, 2018	SDOH/E	
<b>Question 2: How can OHA encourage CCOs to invest and support behavioral health and hold CCOs accountable for these investments?</b>			
<b>Policy Option 8: Direct service providers are using evidence based practices and emerging practices</b>			
<b>Key Next Steps</b>	<b>Completion Date</b>	<b>Link with other topic areas</b>	<b>Comments</b>
Update OHA's approved EBP list	4/30/18		
Research: LA County's implementation of EBP for Medicaid population and other states ways of tracking use by providers (and CCO payment of)	5/15/18	VBP	Connect with National Association of State Mental Health Program Directors (NASMHPD) Children's Division
Develop definition for Emerging Practices	April 30, 2018		Connect with NASMHPD Children's Division
Develop outcome measures or metrics for Emerging Practices.	May 31, 2018		Connect with NASMHPD Children's Division
Develop policy briefing and presentation materials for committee and public input	April 2, 2018		
Committee engagement and input	May 10, 2018		
Incorporate committee and public survey feedback into final recommendations for leadership	May 4, 2018		
Finalize draft recommendations to OHPB	May 25, 2018		
<b>Policy Option 9: Identify options available to pay for use of evidence based practices</b>			
<b>Key Next Steps</b>	<b>Completion Date</b>	<b>Link with other topic areas</b>	<b>Comments</b>
Explore models for implementing and promoting statewide evidence based practice requirements	4/1/18	Cost, VBP	
Explore OHA model for seeding train the trainer models for EBP trainings across the state at the beginning of each CCO contract	4/1/18		
Explore ways to promote provider investment in and practice of evidenced based practices	4/1/18		
Explore modifiers to codes for rate differences for EBP and audit structure or tracking use of models	4/1/18		
Develop policy briefing and presentation materials for committee and public input.	April 2, 2018		
Committee engagement and input.	May 10, 2018		

Incorporate committee and public survey feedback into final recommendations for leadership	May 4, 2018		
Finalize draft recommendations for OHPB	May 25, 2018		
<b>Question 4: What strategies should OHA take to ensure CCOs provide a children’s BH continuum of care to achieve expected outcomes?</b>			
<b>Policy Option 10: Ensure access to a behavioral health continuum of care across the lifespan</b>			
<b>Key Next Steps</b>	<b>Completion Date</b>	<b>Link with other topic areas</b>	<b>Comments</b>
Review CCO contracts for continuum of care requirements	3/30/18		OC&P and HSD contracts may be engaged during this step Need to determine role and level of OHAs responsibility to develop and build infrastructure for CCOs especially for statewide services (i.e. Children’s PRTS and Subacute).
Identify gaps in behavioral health services	4/30/18		DHS/OHA joint proposal DHS and OYA Intensive Service Capacity Project – OHA Children with Specialized Needs group OPP BHC
Research how to measure access to continuum of care	4/30/18		944 RFP and implementation DHS central referral system Include consultation from HPA data in order to confirm that we can collect and measure chosen indicators Consult with AOCMHP regarding barriers in rural settings; service diversity availability
Tele health, OPAL, ECHO options placeholder			SB 1539 to expand OPAL to adults, ECHO recently expanded
Develop policy briefing and presentation materials for committee and public input.	April 2, 2018		
Committee engagement and input	May 10, 2018		

Incorporate committee and public survey feedback into final recommendations for leadership	May 4, 2018		
Finalize draft recommendations for OHPB	May 25, 2018		
<b>Policy Option 11: Ensure there are ample incentives and opportunities to work across systems</b>			
<b>Key Next Steps</b>	<b>Completion Date</b>	<b>Link with other topic areas</b>	<b>Comments</b>
Research opportunities to work across systems	March 30, 2018		DHS/OHA recommendations System of Care work in CFBH and DHS
Research opportunities to promote CCOs participation in cross system collaborations.	April 30, 2018		Contracting? Cross system contracting?
Develop policy briefing and presentation materials for committee and public input.	April 2, 2018		
Committee engagement and input	May 10, 2018		
Incorporate committee and public survey feedback into final recommendations for leadership	May 4, 2018		
Finalize draft recommendations for OHPB	May 25, 2018		
<b>Policy Option 12: Ensure there is a children’s behavioral health system to achieve measurable symptom reduction</b>			
<b>Key Next Steps</b>	<b>Completion Date</b>	<b>Link with other topic areas</b>	<b>Comments</b>
Research: what are other states doing to ensure there is an effective children’s behavioral health system?	May 1, 2018		Contracts, OARs Possible outreach to Angela Leet for research they have already done Connect with NASMHPD Children’s Division
Research: how are other states measuring?	May 1, 2018		Do we have the ability to get the data? Connect with NASMHPD Children’s Division
Research: use of The Hope Scale for statewide measurement of wellness	May 1, 2018		Do we have the ability to get the data? Corbin University interest to do research with this tool? (in coordination with the OHA)
Research OHA’s ability to gather outcome measures already being used in the state.	March 30, 2018		Possible Oregon State Hospital. Partner with PSU and Think Kids for outcomes related to Collaborative Problem Solving

Explore current state of MOTS and how to use that tool better to gather outcome data that OHA could measure symptom reduction and/or increase in resilience factors or addition of The Hope Scale questions.	March 30, 2018		CANS data collection for children in BH and in foster care
Develop policy briefing and presentation materials for committee and public input.	April 2, 2018		
Committee engagement and input	May 10, 2018		
Incorporate committee and public survey feedback into final recommendation for leadership	May 4, 2018		
Finalize draft recommendations for OHPB	May 25, 2018		
<b>Policy Option 13: Ensure special populations, prioritizing children in Foster Care, have their physical and behavioral health needs met by CCO and system of care.</b>			
<b>Key Next Steps</b>	<b>Completion Date</b>	<b>Link with other topic areas</b>	<b>Comments</b>
Review CCO contract to see if children in Child Welfare and/or OYA are identified (if not, include in recommendation)	March 30, 2018		Work with contracts at OHA
Research options to promote CCOs to meet the needs of children in foster care.	April 30, 2018	VBP	Would like to reach out to Casey Family Foundation and Bobby Martin Possible outreach to Angela Leet for research already done Possible addition of children in OYA custody or diversion from custody but do not have stable home/housing
Research flexibility around payment models, including if children are out of area but remains with CCO	April 30, 2018	VBP	Would like to reach out to Casey Family Foundation and Bobby Martin Possible outreach to Angela Leet for research already done
Develop policy briefing and presentation materials for committee and public input.	April 2, 2018		
Committee engagement and input	May 10, 2018		
Incorporate committee and public survey feedback into final recommendations for leadership	May 4, 2018		
Finalize draft recommendations for OHPB	May 25, 2018		