

Coordinated Care Organizations and Public Health Authorities in Collaboration

Columbia Pacific CCO and Tillamook County Health and Human Services *Activities and Insights*

The Columbia Pacific Coordinated Care Organization (CCO), Tillamook County Health and Human Services (HHS), and Tillamook Family Counseling Center (TFCC) are working together to improve the quality, delivery, and accessibility of health care in Tillamook County. Collaborative efforts have focused on advancing a model of physical and behavioral health care that fully integrates primary care, behavioral health providers, and public health resources to provide holistic, community-based care.

The following summary describes progress toward integrating behavioral health in Tillamook County. In addition, it reflects on lessons learned, and suggests effective approaches for transforming health care through the collaborative power of CCOs and local public health authorities.

Collaborating to Integrate Care

Prior to formation of the CCO, TFCC, and HHS collaborated on organizational innovations to integrate physical and behavioral health care in Tillamook County. Those early efforts were essential for building solid leadership, forging partnerships, identifying opportunities, and setting the stage for ongoing integration efforts. Now the CCO and public health partners are carrying that work forward. Then, as now, collaborators have been guided by a shared belief that integrating treatment for the whole person results in seamless, cost effective care.

A Research-Based Approach

After more than a year of research that included clinic visits, community input, and a review of literature in the field, the CCO and HHS implemented an integration model that unites the

Integrating Behavioral and Physical Health

Columbia Pacific Coordinated Care Organization (CCO), Tillamook County Health and Human Services (HHS), and Tillamook Family Counseling Center (TFCC) are advancing a model that connects Medicaid patients to public and private behavioral and physical health resources through the patient's primary care clinic.

Thanks to the early efforts of TFCC and HHS, and ongoing support from the CCO, a behavioral care provider is now located in a primary care clinic in the Tillamook County Public Health Department. The provider treats clients, and links them with community resources. The model allows the CCO to do the following:

- Screen patients for any behavioral health condition in a single location.
- Help clients self-manage behavioral health.
- Use a care team approach that supports person-centered care.
- Tap into HHS's network of home visiting providers and other community resources.
- Use a shared electronic medical record to create a single care plan for primary and behavioral health.

The CCO's integrated approach has been featured at conferences as a model for streamlined, holistic, community-based care.

Collaboration Insights

- Reach consensus about the right integration model for a given situation.
- Lead collaboratively. Integrate partners into key leadership roles early in the process.
- Create an effective business plan.
- Be flexible. Integrating care sectors is complex—but achievable!
- Harness available integration resources.

previously bifurcated management of behavioral health conditions and substance abuse. At the same time, the model links behavioral health providers with primary medical providers, public health programs, and other community resources in order to streamline care for Medicaid clients.

Integration at Tillamook Family Health Center

The current focal point of the CCO's integrated health care model is the Tillamook Family Health Center, a primary care clinic housed within the Tillamook County Public Health Department. Thanks to the earlier efforts of HHS and TFCC, a behavioral health consultant is now stationed in the health center, providing treatment, and serving as a hub for linking primary care patients with behavioral care resources. A critical component of this model is the integration of clinical and behavioral data on a unified electronic medical record. The record allows for a single care plan between behavioral health providers and primary care specialists. The integrated model allows TFCC to do the following:

- In the same location, screen patients for substance and alcohol abuse *and* for behavioral health conditions.
- Help clients self-manage behavioral health with periodic involvement from a behavioral health provider.
- Use a care team approach that allows primary care providers, the behavioral health provider, and HHS staff (located under the same roof) to collaborate on customized care approaches.
- Tap into HHS's broad network of visiting care providers, school nurses, and other community resources in order to tailor patient care.



Coordinated Care on Oregon's North Coast

Columbia Pacific Coordinated Care Organization (CCO) serves the north coastal counties of Tillamook, Clatsop, Columbia, and the city of Reedsport in Douglas County. Historically, CareOregon provided physical health care to Medicaid clients across the region, and Greater Oregon Behavioral Health, Inc., (GOBHI) managed behavioral health services that were provided by Tillamook Family Counseling Center. In 2012, CareOregon and GOBHI partnered to form the Columbia Pacific CCO, which now offers both physical and behavioral health services to 26,000 members, including 6,000 Tillamook County residents.

Adaptable Financial Models

Traditional reimbursement channels, payment models, and administrative systems are not well-suited to an integrated physical and behavioral health approach. Integration demands financial adaptation. In Tillamook County, the CCO's partnership with Greater Oregon Behavioral Health, Inc., (GOBHI) is providing a framework for new approaches to financial administration. Changes are underway, but not yet complete.

Others May Follow

The integration model implemented by the CCO and its partners has been featured in statewide conferences and a national webinar. Collaborative efforts in Tillamook County could light the way for behavioral health care integration elsewhere in Oregon and the nation.

Approaches and Insights

Collaboration between Tillamook County HHS, the Tillamook Family Counseling Center, and Columbia Pacific CCO has been rewarding and fruitful. Uniting physical and behavioral health, merging public and private efforts, and integrating services has presented challenges and opportunities. Collaboration participants have gained the following insights along the way:

Agree on the best model. Work toward consensus about what type of health care integration model

will be best for the situation. Successful teams employ a variety of integration approaches that fit the needs and available resources of all involved.

Nurture strong relationships between leaders. From the start of the collaborative effort, CCO and HHS executives shared leadership duties. For example, Tillamook County Public Health led the process to create the community health assessment and the community health improvement plan. And the Public Health Administrator has served on the CCO board since its inception, and chairs the CCO's local community advisory committee. Integrated leadership has built a solid foundation for integrated behavioral health care in Tillamook County.

Create an effective business plan. A solid business plan is critical for monitoring progress and sustaining gains. State and national policies can provide a framework for planning.

Be flexible. Behavioral health integration is a new approach. It brings together care providers who have different financial models, administrative processes, work settings, and organizational



cultures. Be creative and open to new ways of doing things, and be patient.

Take advantage of available resources. Much has been written on the topic of behavioral health integration, and Internet resources abound. The website of the Integrated Behavioral Health Project at www.ibhp.org provides a comprehensive 350-page toolkit to guide integration projects. Another helpful resource is Patricia Robinson and Jeffrey Reiter's 2006 book, *Behavioral Consultation and Primary Care: A Guide to Integrating Services*.

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