
Home CCO Enrollment

Adult Mental Health Residential Treatment Transition

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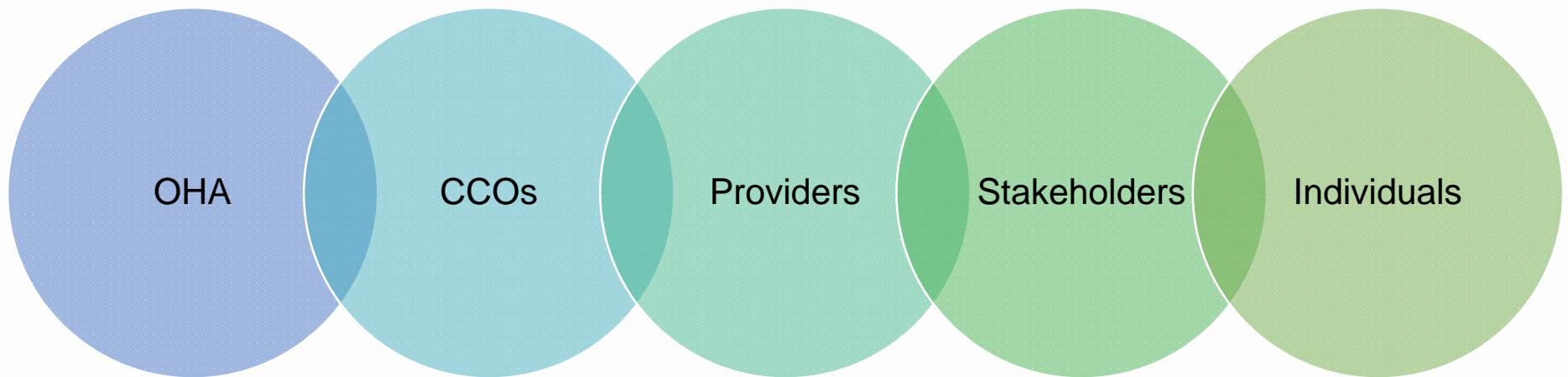


August 2015

Today's Objectives

- To understand the origins and importance of Home CCO enrollment
- To recognize the challenges and opportunities that Home CCO enrollment brings to the residential treatment system
- To start a robust conversation about how, by working together, we can come up with effective solutions and best practices

Working Together to Transform Our Health Care Delivery System



The Oregon Health Authority is committed to providing Oregonians the **right service** at the **right time**, in the **right setting** for the **appropriate length of time**.

Transitioning Mental Health Residential Treatment into Coordinated Care

An important next step in expanding the **coordinated care model** in Oregon is continuing the integration of behavioral and physical health by transitioning adult mental health residential treatment into coordinated care organizations (CCOs).

Full integration is expected in **July 2017**.



Oregon's coordinated care model

The Importance of Residential Care



For individuals experiencing mental illness, residential treatment helps promote and enhance skills needed to lead **independent, healthy lives.**

Residential treatment supports a path to more independence in an individual's **home community**. CCOs work closely with providers to coordinate these services.

Transitioning Mental Health Residential Treatment into Coordinated Care

Residential treatment is not always available close to home, so individuals receiving these services often move out of their CCO service area **temporarily**.

Staying enrolled in the same CCO ensures coordinated care across multiple placements and locations, allowing for person-centered care and continuity of treatment.



Creating an Oregon Administrative Rule for “Home CCO” Enrollment

Although the state and CCOs have been operating under the expectation that an individual’s home CCO will continue to coordinate their care, Oregon Administrative Rules have not previously defined **“Home CCO enrollment.”**

Creating a new rule defining Home CCO enrollment was the next step in preparing for integration of adult mental health residential services.

OAR 410-141-3066 New Rule!

OHA has **revised rule language** to ensure clear definitions and requirements are outlined for CCO enrollees and individuals being discharged from the Oregon State Hospital.



After several months of input from stakeholders, Oregon Administrative Rule (**OAR**) **410-141-3066** “CCO Enrollment Requirements for Temporary Out-of-Area Behavioral Health Treatment Services” will be effective **September 1, 2015**.

Defining “Home CCO”

(1)(b) “**Home CCO**” means enrollment in a Coordinated Care Organization (CCO) in a given service area, based upon

a client’s **most recent permanent residency**,

determined at the time of **original eligibility determination** or most current point of CCO enrollment prior to hospitalization;

Defining “Temporary Placement”

(1)(c) “Temporary Placement” means hospital, institutional, and residential placement only,

including those placements occurring **inside or outside of the service area**

with the **expectation to return** to the Home CCO service area.

Oregon State Hospital Discharges

The Benefit Coordination Unit will **consult and coordinate with the Home CCO** at discharge (5)(a)

Clients without enrollment history will be enrolled **based on permanent residency** (5)(b)

If a client **does not** have a permanent residency or any enrollment history, they will be **enrolled in the placement service area**. (5)(c)

Early Engagement for Oregon State Hospital Discharge Planning

Oregon State Hospital (OSH) admission:

- OSH staff identify home CCO
- AMHi and County Mental Health liaisons follow the individual through hospitalization

30-to-60 days before discharge:

- OSH staff request expedited Oregon Health Plan eligibility
- Home CCO notified and engagement process begins

Challenges for Home CCO Enrollment

Permanent addresses get changed to temporary placement facilities, causing changes in CCOs and interruptions in care.

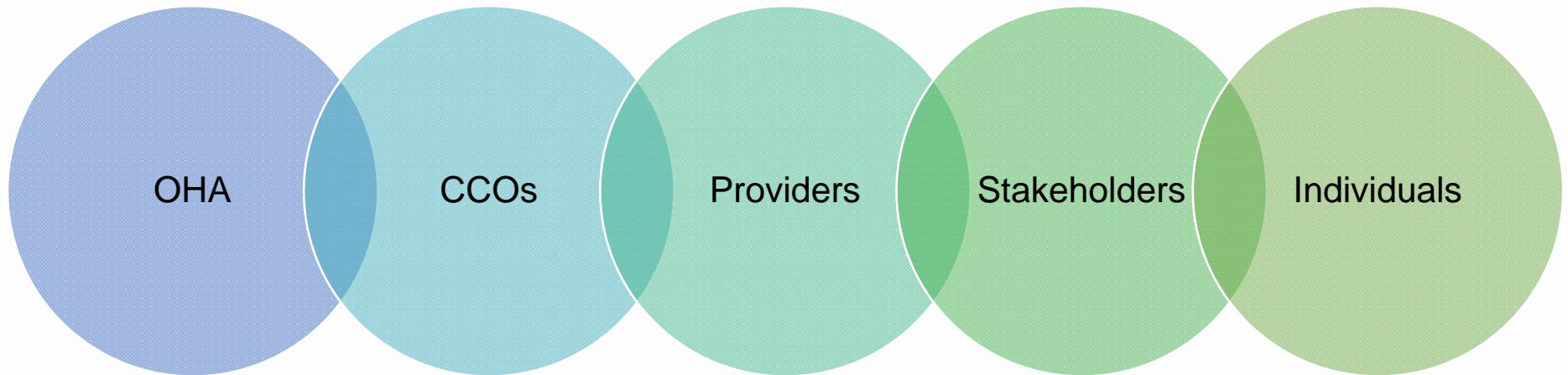
CCO service areas and provider networks do not include all adult residential facilities. Not all CCO service areas have facilities or special programs.

More coordination is needed between CCOs and out-of-area providers, partnering to ensure access to care for individuals receiving residential treatment services.

Strategies to Ensure Successful Coordination of Care

- Implement the Home CCO Enrollment Rule
- Oregon State Hospital discharge planning
- Staff guidance on address changes
- Follow-up session scheduled:
Wednesday, September 23, 11:00-11:45 am
- Monthly provider calls to share best practices and help problem-solve issues
- Ongoing FAQ and dedicated email for questions

Partnering to Problem-Solve



How can we work together to tackle these challenges?

Suggestions for other helpful resources or training?

Contact:

MentalHealth.ResidentialTransition@state.or.us

Stay informed:

<http://www.oregon.gov/oha/amh/rtt/Pages/home-cco.aspx>

