



BI-DIRECTIONAL CARE INTEGRATION WORK GROUP MEETING

KYLE ROESLER, PROGRAM MANAGER

APRIL 24, 2018

Welcome and Introduction

Introduce yourself: Name and Organization

WELCOME

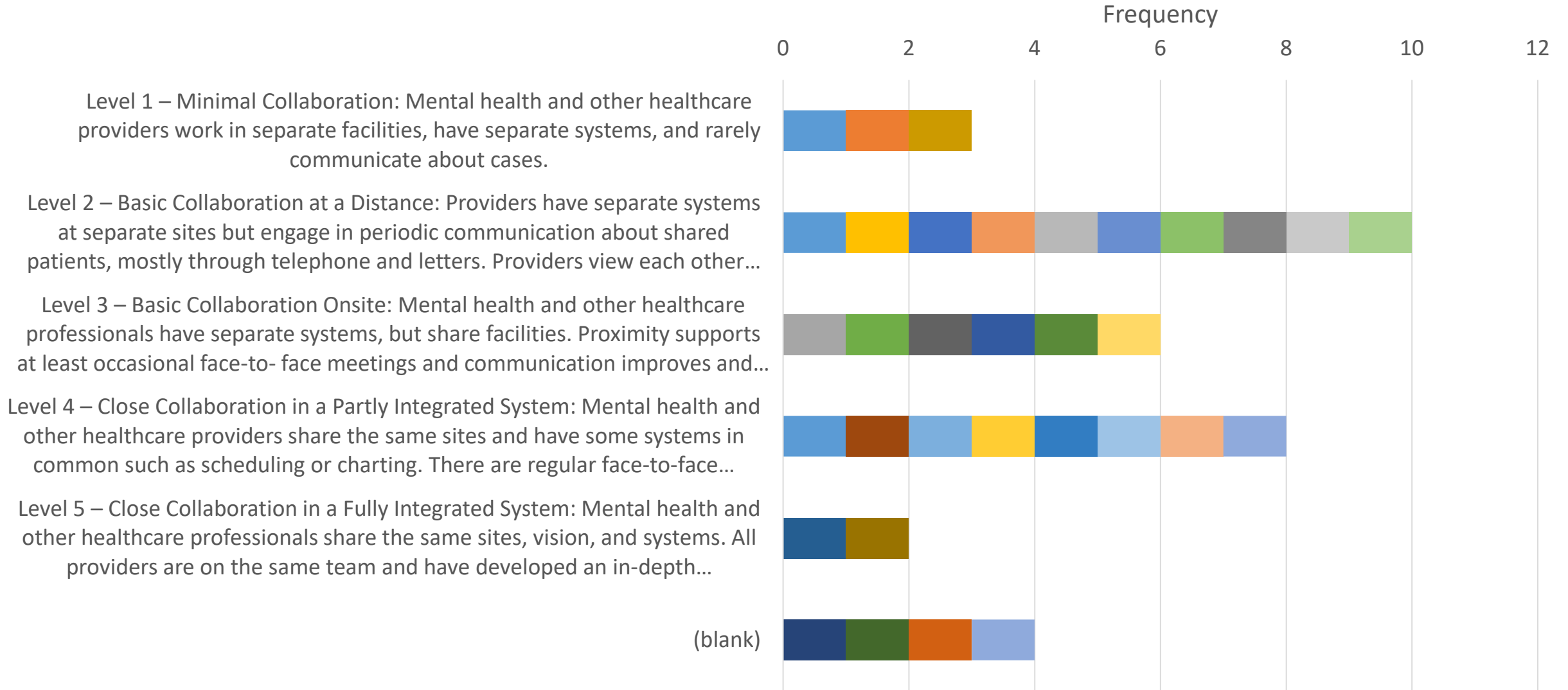
Agenda

- ✓ Mention pre-meeting updates
- ✓ Preliminary Assessment Data
 - ✓ Defining success
- ✓ Laurie Tebo, CEO of BHR presentation
 - ✓ Primary care-behavioral health partnership discussion
- ✓ Next Steps

Current State Assessment Data

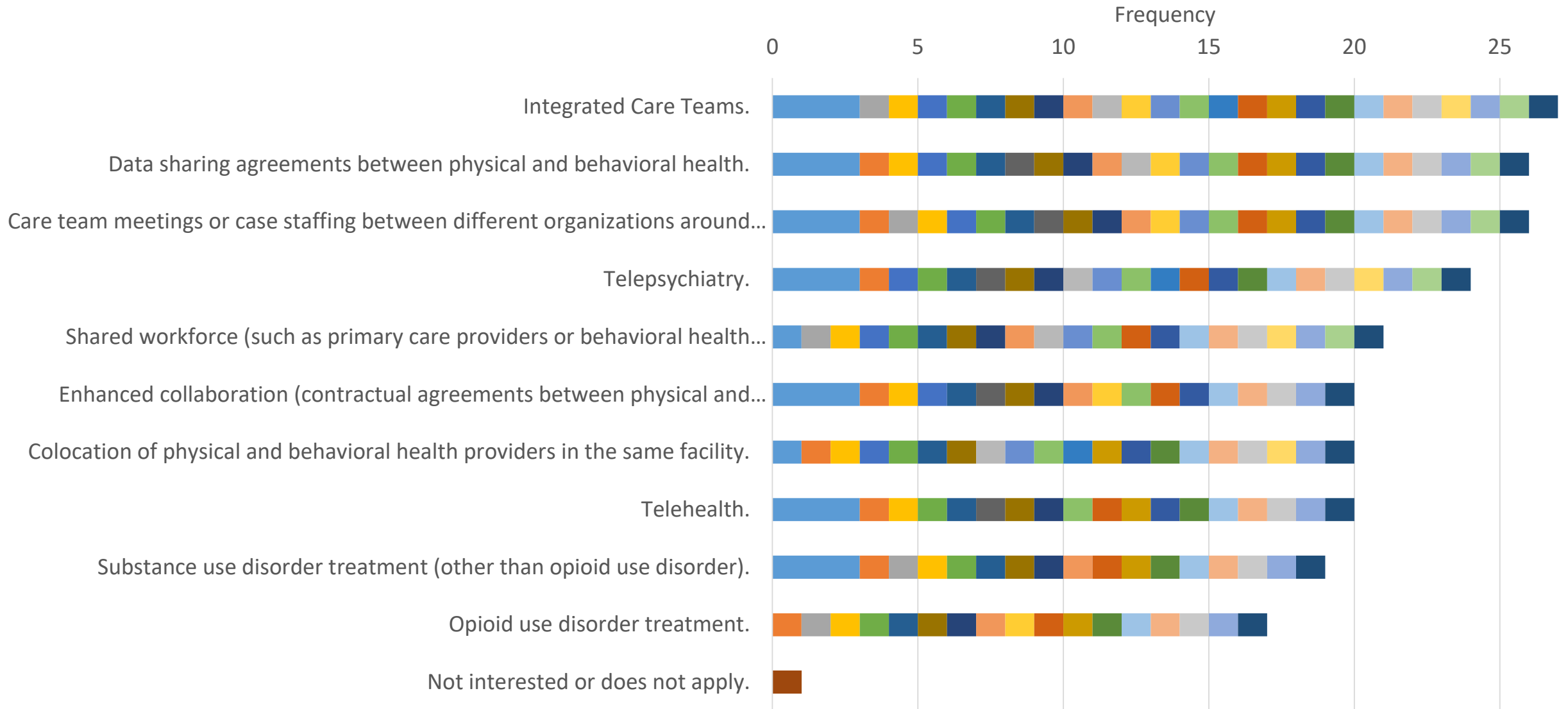
- 52 unique responses
 - 31 selected project 2A
- 19 selected behavioral health
- 19 selected primary care

Which level of integration best describes your practice/clinic/organization?

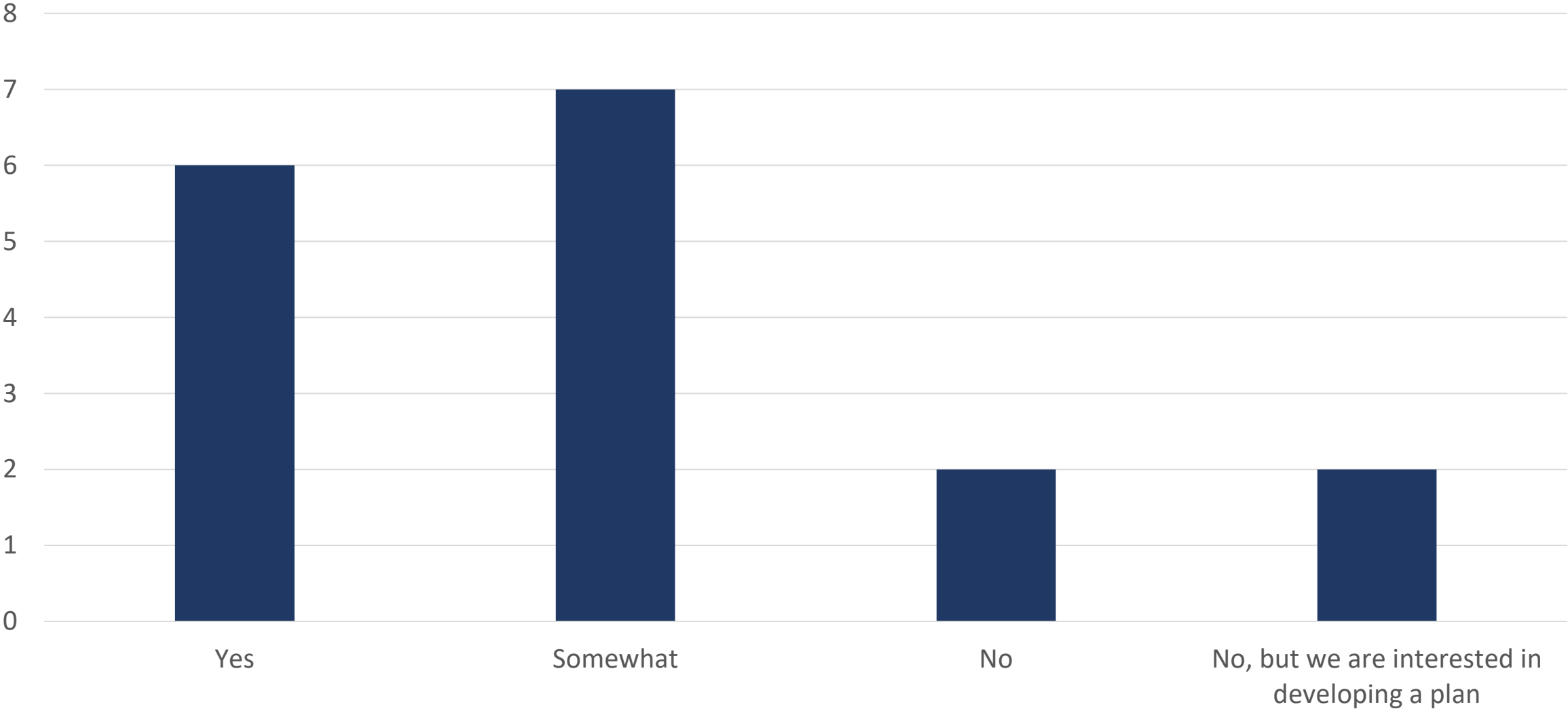


*Based on SAMSHA-HRSA Standard Framework for Levels of Integrated Healthcare

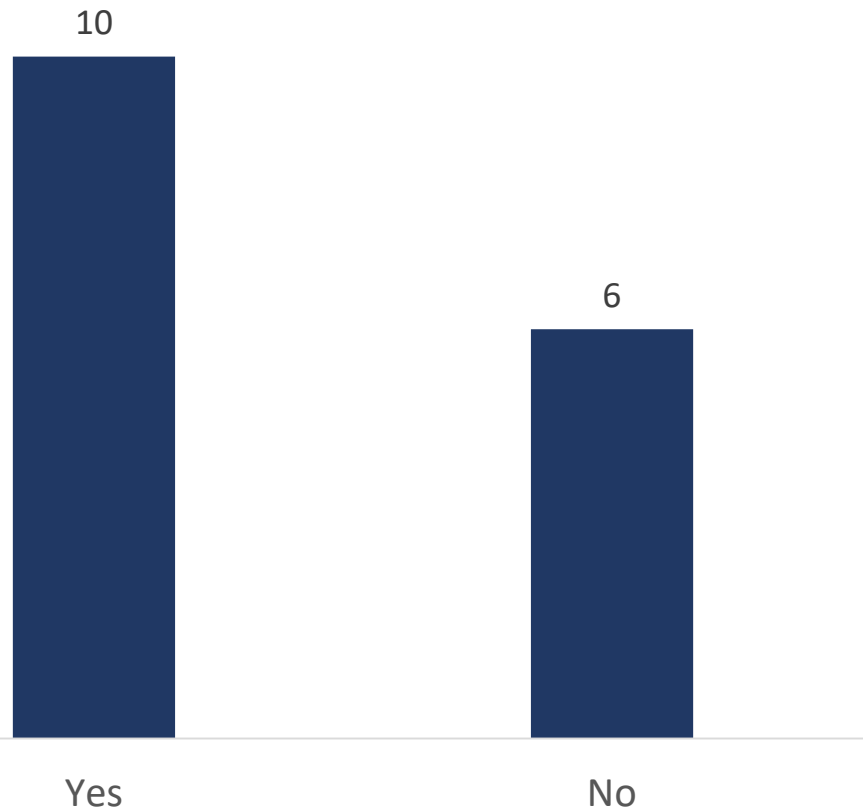
Aspects of integrated care that you are interested in exploring



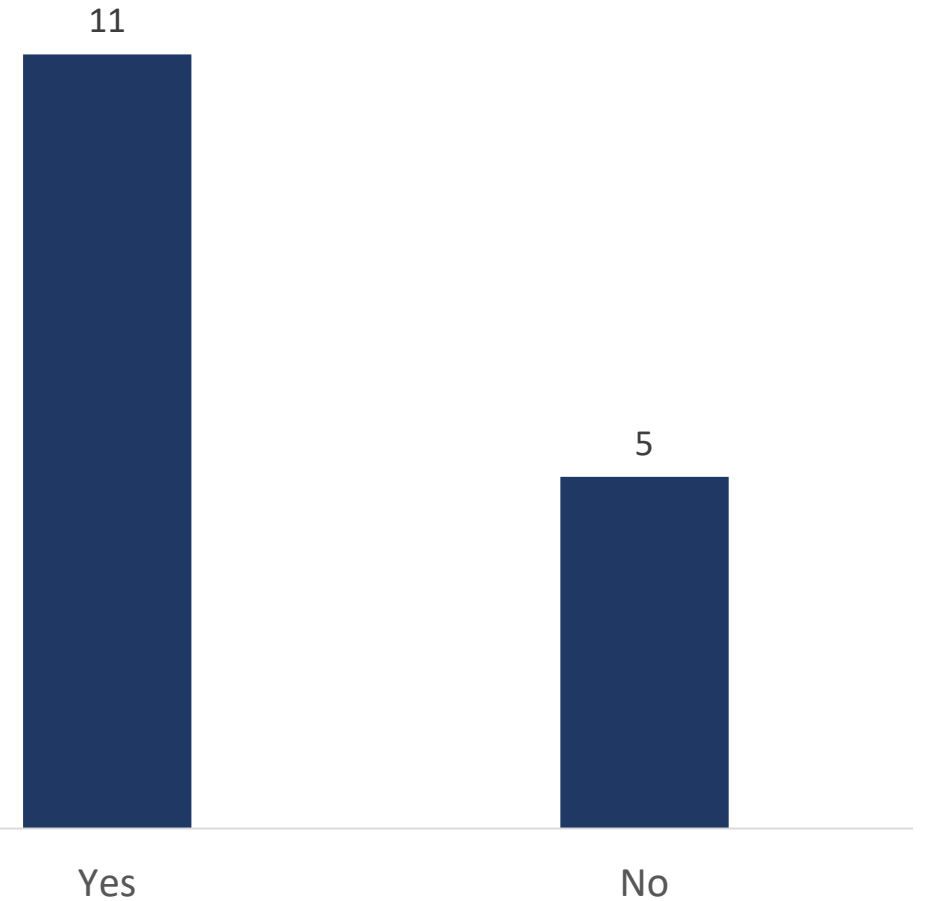
Does your practice have a plan for integrating primary care?



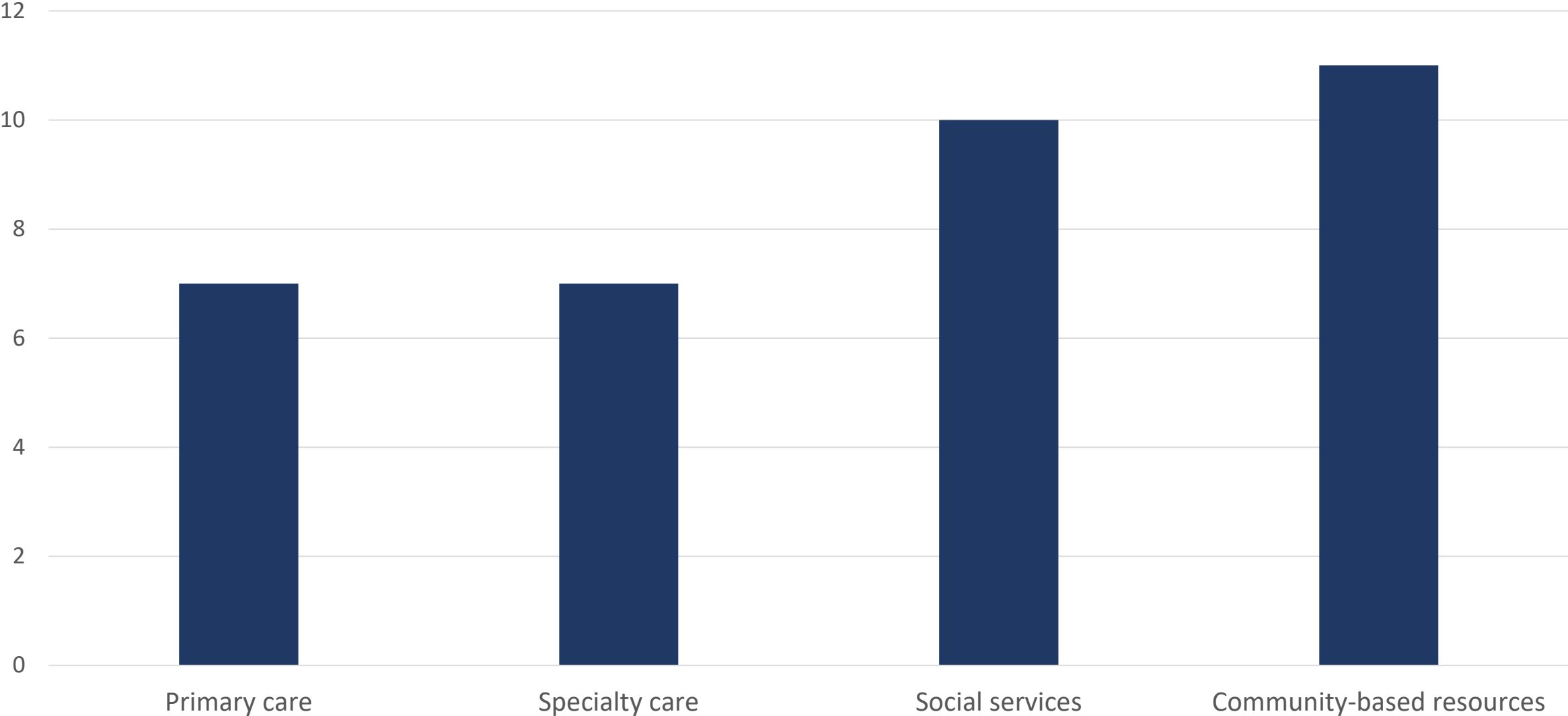
Do you have effective communication mechanisms for care coordination and to promote effective communication with primary care providers?



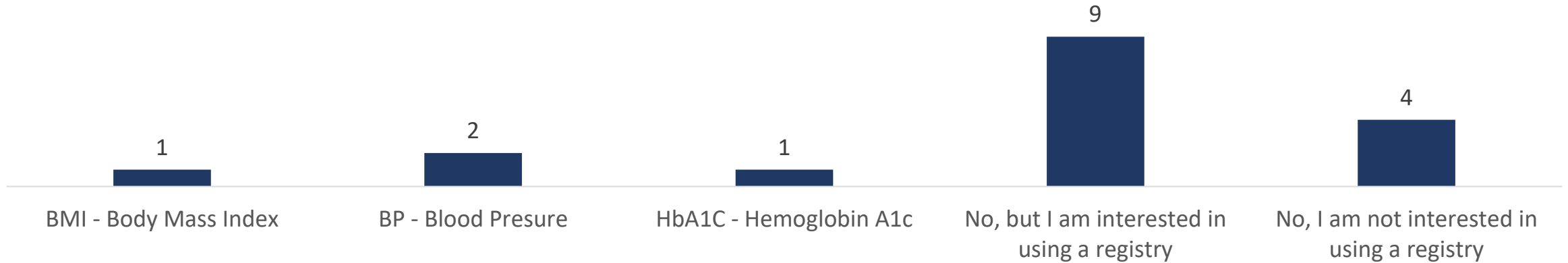
Are care managers and/or coordinators in place to support an integrated care program?



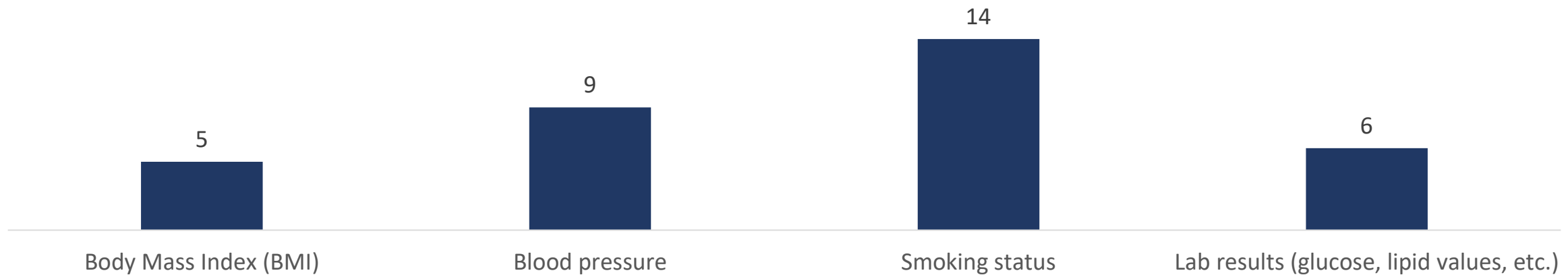
Do providers track referrals to any of the following?



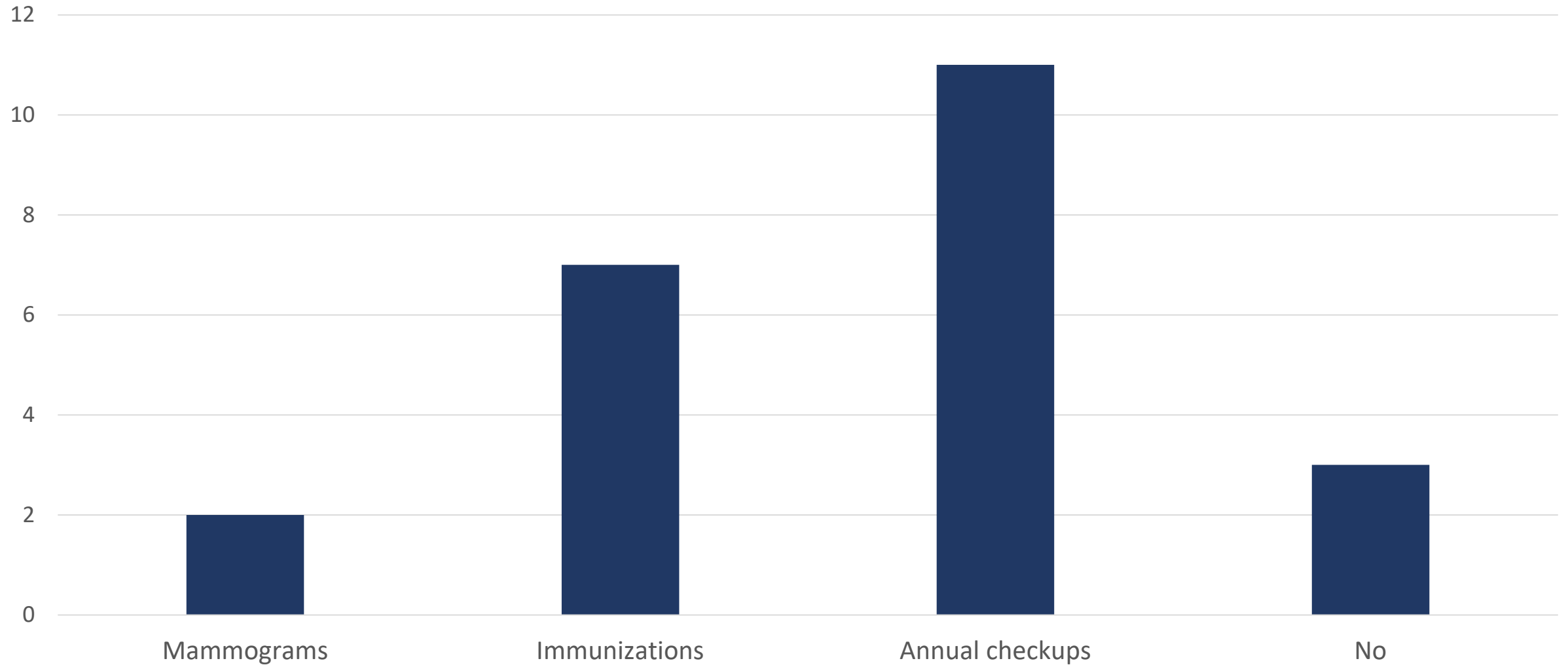
Is your practice using a population-based registry to track any of the following physical health indicators?



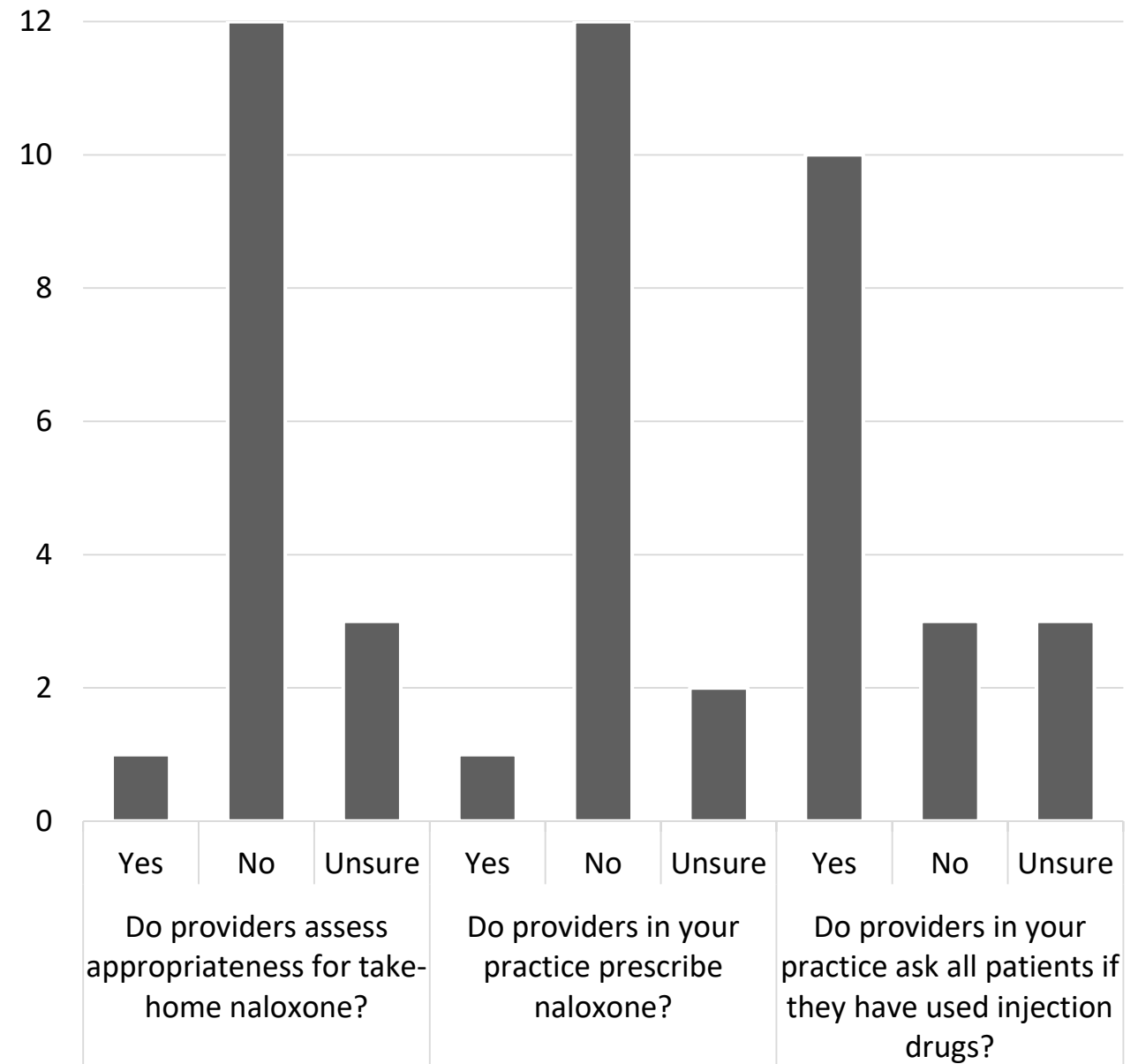
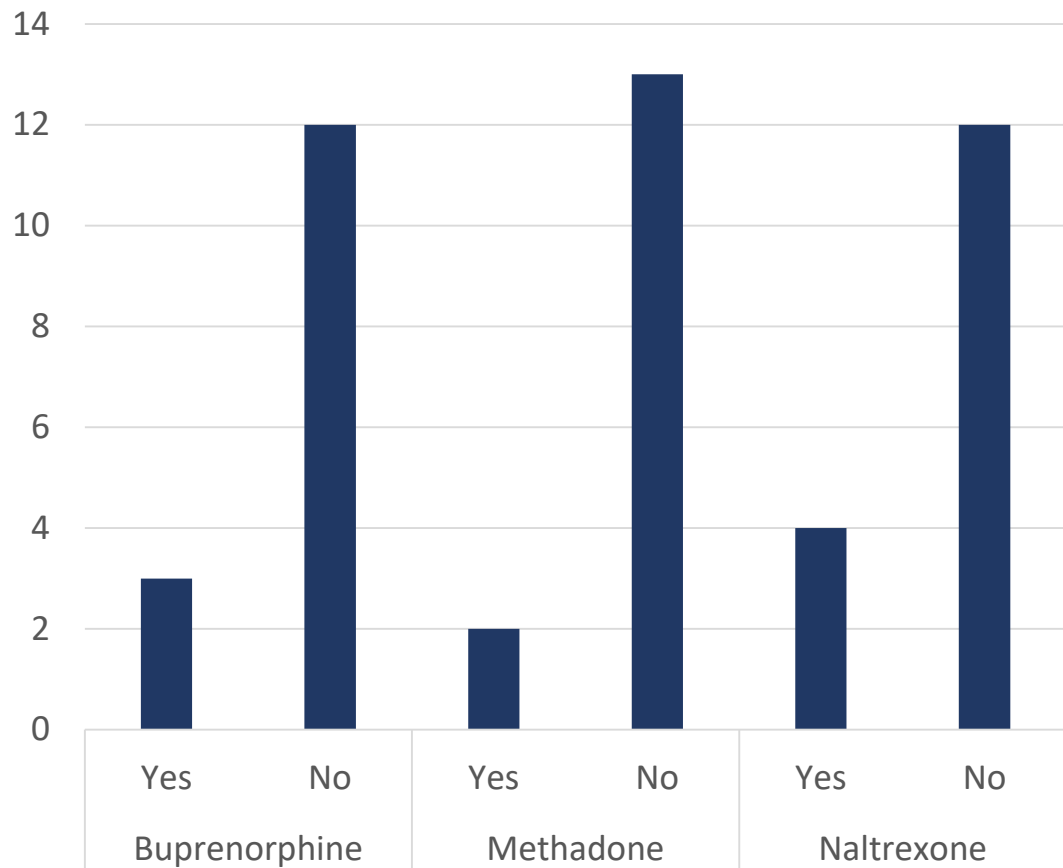
Do you record any of the following physical health indicators in a patient's record? (Please check all that apply.)



Do providers ask about any of the following routine preventative care? (Please check all that apply.)



Do any providers in your practice prescribe medication assisted treatment (MAT)? (Please check all that apply.)



Any Questions?

Behavioral Health Resources (BHR)

- LAURIE TEBO, CEO

Discussion

1. What are you doing right now to prepare for bi-directional care for people with major mental illness?
 - a. How does that fit in with the Medicaid Transformation and your strategic plans?
 - b. What percentage of Medicaid lives do you serve?
2. Have you or leadership looked at forming partnerships with community behavioral health agencies?
3. What does effective collaboration look like? How can you move from referral source to collaboration?
4. How will we establish work flows to ensure patients w/ major mental illness are being served?
5. What work flows exist that have improved links between BH, PC, EDs, etc.?

Summary and Next Steps

- Next steps
 - Finalize Domain 1 strategies
 - Continue developing logic model
 - Providers begin to think about RFP
 - What else would you like covered in the work group meetings?