

Behavioral Health Partnership Oversight Council

Adult Quality, Access & Policy Committee

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Co-Chairs: Heather Gates and Alicia Woodsby Meeting Summary January 15, 2016 2:00 – 3:30 p.m. 2nd Floor CCPA Rocky Hill, CT

Next Meeting: Friday, February 19, 2016 @ 2:00 PM at CCPA, Rocky Hill

<u>Attendees:</u> Co-Chair Heather Gates, Co-Chair Alicia Woodsby, Robin Abraham, Susan Coogan, Terri DiPietro, Marcia Dufore, Daniela Giodano, Elizabeth Gridley, Bill Halsey (DSS), Colleen Harrington (DMHAS), Kim Haugabook, Dr. Charles Herrick, Beth Klink, Marie Mormile-Mehler, Kim Nystrom, Ann Phelan, (VO), Kelly Phenix, Dr. Bert Plant (Beacon), Knute Rotto (Beacon), and Cynthia Zafrin McCahill

Opening Remarks and Introductions

Co-Chair Heather Gates convened the meeting at 2:07 PM, welcomed everyone and announced the merger of the Connecticut Community Provider Association (CCPA) and the Connecticut Non-profit Organization (CT Nonprofits) and will now be known as the Connecticut Community Non-profit Alliance (CCNA). This is effective February 1, 2016. The mission of the new organization will be to advocate and build capacity for community-based, nonprofit organizations and strengthen and sustain healthy communities. Members then introduced themselves.

Approach to Researching Models to Effectively Work with Homeless Individuals Presenting in the ED – Heather Gates and Alicia Woodsby

Co-Chairs Heather Gates and Alicia Woodsby reported that people who are homeless with complex medical and BH issues are often overusing the emergency department for routine and maintenance health care. Community Care Teams (CCTs) such as the model that Middlesex Hospital, the LMHA, soup kitchen and shelter have in place for the Greater Middletown region has helped alleviate such ED overuse and is a great source of consumer data. CCTs provide a better way to track data such as discharge planning and other health related goals. They collect quantitative data of the intangibles and these groups know each other due to working with each other. DMHAS was supposed to fund a number of CCTs around the state in 2016 and more in 2017 but this has been put on hold due the state budget and reduction in services funding. Coordinated Access Network (CAN) applications provide Wrap around services and have reduced by half the number of hospital visits for many individuals. Alicia added that many agencies involved in these services are applying for a grant from the Connecticut Health Foundation (CHF). Bert Plant (Beacon) added that 75% of ED visitors are episodic visitors rather than persistent. This has implications for the evaluation methodology selected to demonstrate the outcomes from CCTs and other interventions with high utilizers. Co-Chair Heather Gates said the committee will be re-visiting this topic in three to four months, probably in May 2016.

Review of Data Available through Beacon Health Options (VOI) Reports



Bert Plant (Beacon) reviewed production data on utilization and quality reports that was presented the week before at the Behavioral Health Partnership Oversight Council. Trends can be tracked overtime by reviewing utilization on various levels of care and membership. Recent growth in membership under the affordable care act has contributed to lower utilization per thousand for higher levels of care. The primary source of data is Medicaid claims and to get a more complete picture of true service utilization Beacon must partner with other organizations to obtain information on services that reimbursed by Medicaid. A request was made to have Beacon and the state agency partners bring trends to the committee earlier in the process. One area for discussion will be the data on use of IOP. This will be presented at the March meeting.

CCBHC Grant Update and Update on BHH- Colleen Harrington (DMHAS)

Colleen Harrington said that six agencies (CHR, United Services, CMHA, Inter-Community, Wheeler, and BH Care) had their kick-off last week and must submit their readiness tools by January 26, 2016. The Behavioral Health Home State Plan Amendmentwas submitted before December 31, 2015 and CMS has already responded back with questions on details. BHH's are eight people short of a 5000 member enrollment as of this week.

Goals and Objectives for 2016

Housing issues are a big concern because adequate housing indicates overall health in the community. Co-Chair Heather Gates asked that information and data trends be brought to the committee faster and sooner and this should guide the goals and objectives of the committee for the rest of the year.

New Business and Announcements

Co-Chair Heather Gates asked for new business or announcements. At the next meeting, the committee will focus on the goals and objectives for 2016. Beacon Health Options will have a report on IOP for the March meeting. Hearing nothing else, she adjourned the meeting at 3:35 PM.

Next Meeting: Friday, February 19, 2016 @ 2:00 PM at CCNA (formerly CCPA), Rocky Hill