

Behavioral Health Partnership Oversight Council

Adult Quality, Access & Policy Committee

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Tri-Chairs: Paul Acker, Dr. Frank Fortunati, Jr., and Howard Drescher

Meeting Summary March 8, 2022 10:30 AM – 12:00 PM <u>Via Zoom</u>

Next Meeting: Tuesday, May 10, 2022 @ 10:30 AM via Zoom

<u>Attendees:</u> Co-Chair Dr. Frank Fortunati, Jr., Neva Caldwell (CFAC), Roberta Cook, Jaya Daptarder, Erin Donahue, Colleen Harrington (DMHAS), Brenetta Henry, Keri Lloyd (DSS), Elizabeth McOsker (Beacon), Kelly Phenix, Bert Plant (Beacon), Katherine Willis (DMHAS), and Rod Winstead (DSS))

Opening Remarks and Introductions

Co-Chair Frank Fortunati, Jr. convened the meeting at 10:35 AM and introductions were made. He thanked Beacon for reporting on quality measure on the Medicaid Behavioral Health program from 2018 to 2020.

Behavioral Healthcare in CT: How Are We Doing? – Bert Plant and Elizabeth McOsker (Beacon)

Healthcare Effectiveness Data Innovation Set (HEDIS) Measures: How does the quality of care in CT for adults with Medicaid compare against other states and New England?

Generally, on measures regarding mental health (for examples, receiving an antidepressant medication and remaining on it after a diagnosis of Major Depressive Disorder; remaining on an antipsychotic medication for at least 80% of the year following a diagnosis of schizophrenia; and follow-up after a psychiatric hospitalization), Connecticut performs better than the national average. Further, CT performs roughly equal to the North East. Within Connecticut, however, we did not perform as well on these measures with Medicaid recipients who are Black, and those who are younger. On measures regarding substance use CT's performance is mixed. On a measure regarding treatment for opiate use (receiving Medication Assisted Treatment (MAT) for 120 days following presentation primarily for an opiate use, CT performed better than Medicaid recipients nationally as well as in the Northeast. On another measure (follow-up after Alcohol Use as the reason for ED presentation (FUA), CT performed above the national average, but well below the average in the Northeast. And for a measure regarding initiation and engagement for alcohol and other drug abuse treatment (IET), CT performs low on initiation, but high on engagement.

In summary, CT generally performed above average nationally, and at the average for the North East. CT also performed well on measures of medication adherence, but below average on substance use measures.

Elizabeth McOsker shared the CTBHP-Beacon Dashboard and took questions as the presentation proceeded.

New Business, Announcements, and Adjournment

Co-Chair Dr. Frank Fortunati thanked Bert and Elizabeth for presenting adding that he was not aware of all the measures that are being tracked. He then asked for new topics for future presentations. Frank stated the next meeting will be on Tuesday, May 10, 2022 via Zoom. He then adjourned the meeting at 12:01 PM.

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