ENHANCED CARE CLINICS Child and Adolescent Quality, Access and Policy Committee March 16, 2022



Making a Difference

Enhanced Care Clinics Timeline

DCF and DSS issued Request for Applications June 2006

DSS Issued Provider Bulletin 2006-47 in June 2006

DSS Issued Provider Bulletin 2007-44 in June 2006

DSS Issued Provider Bulletin 2007-59 in September 2007

Enhanced Care Clinic Definition

Enhanced Care Clinics (ECC's) are specifically designated Connecticut based mental health and substance use clinics that serve adults/or children. They provide routine outpatient services such as individual therapy, group therapy, family therapy, medication management, coordination of care with primary care physicians, and other special services for the Connecticut Behavioral Health Partnership (CT BHP).

The overall goal of the Enhanced Care Clinics initiative is to provide adults and children who are seeking behavioral health services and supports with improved timeliness of access to behavioral health care as well as improved quality of care.

Requirements for Being an ECC

- Must establish and maintain a centralized point of access that covers all clinic sites.
- Must accept 100% telephonic and walk-in referrals that present during business hours and are within the clinic scope of practice and catchment area.
- All referrals must be screened by a trained intake worker or clinician and triaged to determine whether the referral is emergent, urgent or routine. Triage must be done even if the clinic now uses the Open Access Model.
- Must screen self referrals (member or parent) on the same day that the referral is received during business hours.

Requirements Continued

- Referrals received from individuals other than the member or parent must be screened when the clinic first has contact by telephone or face to face with the member or parent.
- The triage process must provide for diversion to a hospital-based emergency department for members that require medical arrangements (e.g. overdose) or whose level of physical agitation would present a danger to self or others in the clinical setting.
- Following initial evaluation and determination that a member is clinically appropriate to receive outpatient services they must be offered a follow up appointment within 14 calendar days of the

Requirements Continued

- Initial evaluation. For members that require more intensive service than outpatient the clinic must facilitate linkage to the more appropriate service. If timely linkage is not possible the clinic must provide follow up care to the member until such linkage is possible.
- Must coordinate with Non-Emergency Medical Transportation (NEMT) when necessary.
- Maintain appropriate documentation standards as outlined in the provider bulletins.

ECC Expansion

- A recommendation was formally submitted to the Behavioral Health Oversight Council by the Diversity, Equity and Inclusion committee to expand ECC's to increase access to members and address some diversity issues.
- ECC providers submitted written letters along with an updated attachment B to request expansion.
- As a result, 118 new ECC sites were added to the existing network.
- The effective date for billing for the new sites was 1/17/2022.

ECC Expansion Continued

- Due to the recency of the expansion there is currently not enough data to make a determination of the impact.
- In addition to the previously existing requirements, ECC providers have been asked to submit demographic on the members served at each ECC site, the ECC staff at each site and the board of directors for the agency. The first submission which will be used as baseline data is anticipated to be received by the end of April 2022.

QUESTIONS ???