

Meeting Summary for BHP Child/Adolescent Quality Access & Policy Committee Zoom Meeting

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Quick recap

The team discussed the Urgent Crisis Centers (UCC) initiative, its role in the community, and the challenges faced in its implementation, including funding, ambulance transport, and collaboration between EMS providers and community providers. They also highlighted the importance of improving mental health services for children, raising awareness about their services, and the need for a sustainable funding structure. Lastly, they shared updates about the upcoming "iCan" conference and the resumption of their meetings after a break on June 19th.

Next steps

Steve will merge the two agenda items regarding UCC funding changes and their impact into a single agenda item for the record.

DSS will continue efforts to connect with local ambulance services and school superintendents to promote UCC as a referral alternative to emergency departments.

DSS will assess utilization and data around outcomes to report on the status of the UCC program and its impact.

Frank will develop connections with providers and work on data elements for the CHDI project, with the SAMHSA contract for 18 months starting in July.

Kristin and Erin will continue to work on operationalizing the UCC and ensuring compliance with Medicaid codes and rates.

David will update the distribution list to reflect that there will be no meeting on June 19th in recognition of Juneteenth.

Summary

UCC Funding Changes Discussion

David initiated the meeting, which was being recorded and covered live on CT-N. Steve suggested delaying the start to accommodate more latecomers and asked participants to introduce themselves via the chat function. Melissa, the other Co-Chair, apologized for potential technical issues. Steve then clarified an earlier miscommunication about the agenda, which had been caused by his involvement in confirming speakers for the UCC presentation. The actual agenda was one item about UCC funding changes and their impact, involving all five presenters listed under both previous agenda items. The meeting was set to discuss this consolidated agenda item.

Urgent Crisis Center Funding Changes and Impact Discussion

Steve initiated a discussion about UCC funding changes and their impact, with Frank Gregory from DCF. Frank and Fatmata Williams (DSS) provided an overview of the new Urgent Crisis Centers (UCC) initiative and its role within the community, emphasizing that UCCs offer intensive assessment, support, and connection to care for families, often serving as a diversion from emergency departments when appropriate. Fatmata elaborated on the Medicaid side of the UCC sustainability, explaining that DSS enrolled UCC providers as outpatient psychiatric clinics and required them to upload their DCF certification and obtain an updated certification letter upon re-enrollment. The meeting also clarified questions about ambulance reimbursement rates and the protocol for arranging ambulance transport to the UCC, which

Frank clarified is still under development but DPH has authorized ambulance providers to triage and assess youth in need of crisis intervention.

Ambulance Transport Project Progress and Challenges

The team discussed the complexities and progress of the ambulance transport project, emphasizing the need for a cultural shift in collaboration between EMS providers and community providers in Connecticut. They highlighted the challenges faced, such as resistance from emergency responders and the need for significant funding. The team also discussed the implementation of a program supporting infrastructure under the State plan for Medicaid reimbursement, the potential for leveraging other service providers for marketing, and the importance of the wireless surcharge model for funding state services. They agreed on the need for ongoing marketing and education efforts, as well as the importance of building trust and engaging with communities to ensure the success of the project.

Improving Emergency Rooms and UCC Referrals

Howard Sovronsky emphasized the urgency of the initiative to improve the current state of emergency rooms, highlighting the continuing issue of overcrowded emergency rooms with 203 children waiting for transfer. Christina raised a concern about the minimal referrals made to the Urgent Care Centers (UCCs) by 211, suggesting a need to review the protocols. Frank clarified that 211's primary connection is through mobile crisis, and any transfer to UCCs is done in consultation with the mobile crisis provider. The discussion then transitioned to inviting Kristin, Amy, and Erin to share their perspectives.

Medicaid Transition, Partnerships, and Awareness

The team discussed the challenges they were facing with the transition to Medicaid reimbursement, particularly the integration of new codes into their workflow and the potential for future audits. They also highlighted the importance of their partnership with CCMH, focusing on improving mental health services for children and the potential for expansion to other areas. The team emphasized the importance of raising awareness about their services, balancing the need for compliance with clinical application, and the need for a sustainable funding structure. They also discussed their partnerships with Wellmore and other local providers for crisis support services and the importance of clear communication to avoid misunderstandings.

Improving Accessibility and Addressing Overstays

Steve commended the team's successful implementation of a plan to address inpatient overstay situations and improve accessibility to services for children. Frank emphasized the importance of utilizing both emergency mobile crisis services and urgent crisis centers to respond to needs effectively. The team also discussed the ongoing discussions about health equity and accessibility, with Steve inquiring about potential bundled rates for the UCCs and the timeline for this. Kristin Pracitto shared that they have a dedicated wall in their UCC for family feedback, which has grown to be about 4 feet high and 3.5 feet wide.

Improving Service Delivery and Analyzing Data

Kristin shared her experiences with feeling unsupported and unheard, prompting Steve to suggest surveying the group for similar experiences and discussing the critical crisis center service in future meetings. Frank announced that they had secured funding to develop connections with providers and expected to begin accessing data elements in July for a contract lasting 18 months. The team emphasized the importance of analyzing data to improve their service delivery approach, with a focus on equity and geographic location. They also expressed interest in the upcoming conference as an opportunity for networking and learning.

Lastly, Maureen O'Neill Davis suggested looking at the outplaced school population and their usage of the 9 1 1 response for a child in crisis as indicators of the effectiveness of their culture shift.

Juneteenth Meeting Adjustment and Conference Updates

Steve announced that the next meeting would not take place on June 19th in recognition of Juneteenth but would instead resume in July. The team also shared updates about the upcoming "iCan" conference on September 26th, which would include two breakout sessions offering CEUs, and a call for vendors. David was asked to distribute this information to those not present in the meeting. Additionally, a 2-hour workshop was mentioned as a requirement for continuing education credits (CEUs).

From Jeff Vanderploeg Child Health and Development Institute

<https://www.chdi.org/index.php/publications/policy-briefs/policy-brief-sustaining-acute-behavioral-health-services-connecticuts-youth-wireless-surcharge-opportunity>