

**Behavioral Health Partnership Oversight Council**  
**DMHAS Advisory Subcommittee**  
**Meeting Notes 6-9-11**

**Local Mental Health Authority (LMHA) coordination with Value Options (VO), Advanced Behavioral Health (ABH), etc.**

A protocol was distributed to the group that was developed by DMHAS in collaboration with the LMHAs and ABH entitled, "Connecticut Behavioral Health Partnership Care Coordination". The document outlines the roles and responsibilities for each entity, their target populations, and next steps/questions that need to be addressed. The protocol describes the care management resources of both ABH and VO as system enhancements designed to augment the care management/coordination activities of the LMHAs and the affiliate provider system, and support positive recovery outcomes for clients.

Concerns were raised by some providers from LMHAs about the resources that will be available to perform the designated roles and responsibilities. They have already transformed their case management services to the CSP/RP model, which is based more on skill building than coordination of services. The group discussed the potential for DMHAS and VO to expand the regional meetings with LMHAs to include regional partners. It was noted that the state-operated LMHAs have the affiliate model but the private not-for-profits do not.

Lori Szczeigal from VO described an exciting disease management program that will kick off on June 17<sup>th</sup>. The intensive care management program will be working with Mckesson to coordinate medical, pharmacy, and behavioral health care. Medical staff will be co-located with behavioral health clinicians at VO.

It was also noted that DMHAS has been working on the group home capacity issue, which has largely been resolved. Some folks are not able to engage in the required 40 hours of treatment under Medicaid, so DMHAS is working with DSS to allow 30 hours and a bifurcated rate under a state plan amendment to Medicaid. There should be a resolution soon.

**Health Home Initiative**

Paul Di Leo, Chief Operation Officer from DMHAS distributed a PowerPoint presentation by the National Council for Community Behavioral Health Care on federal Health Home Care Coordination reform implementation as it relates to behavioral health.

DMHAS will partner with DSS in the design process for Health Homes for the state to aid in the integration of behavioral health care within these entities. The planning process will start in September. It will result in a 90% Medicaid (federal) match for care coordination for providers licensed as Health Homes. The health home design will be the key to how behavioral health fits into the Integrated Care Organization (ICO) design.

**Home Health Care Data from VO**

Value Options provided an update on home health utilization and trends, since the start of the BHP for adults on April 1st. 87.6% of those receiving home health services have medical issues identified on Axis III. 2.9% of those receiving home health services are utilizing home health aide services. The majority of

the service utilization is coming from medication administration. VO will be providing training on recovery for home health providers.

**Acute Care Beds with an Intermediate Length of Stay**

Sue Graham from DMHAS distributed a document that outlines the admission criteria and additional protocols related to the intermediate care psychiatric beds located at St Vincent's Medical Center (Westport Campus). DMHAS noted that they are the first level of assessment for admissions to one of the designated beds, then if the person is a Medicaid recipient they will have to be authorized by VO. VO will not authorize anyone for one of these beds unless they receive approval from DMHAS first. What some members of the group originally thought to be 15 beds at St Vincent's for DMHAS to utilize for intermediate care is actual about 4 to 5 beds.

Next Meeting:

The Subcommittee will not meet in July, and the August meeting is yet to be determined.