

Behavioral Health Partnership Oversight Council

Legislative Office Building Room 3000, Hartford CT 06106 (860) 240-0346 Info Line (860) 240-8329 FAX (860) 240-5306 www.cga.ct.gov/ph/BHPOC

Co-Chairs: Rep. Phil Miller, Hal Gibber & Jeffrey Walter Meeting Summary: November 13, 2013

Next meeting: December 11, 2013 @ 2 PM in LOB 1E

<u>Attendees</u>: Representative Phil Miller (Co-Chair), Hal Gibber (Co-Chair), Jeff Walter (Co-Chair), Paul Acker, Dr. Karen Andersson (DCF), Rick Calvert, Alyse Chin, Howard Drescher, Wally Farrell, Dr. Ronald Fleming, Catherine Foley-Geib, Heather Gates, Dr. Steven Girelli, Bill Halsey (DSS), Peggy Hardy, Colleen Harrington (DMHAS), Dr. Charles Herrick, Thomas King, Mickey Kramer, Sharon Langer, Stephen Merz, Judith Meyers, Lois Nesci, Sherry Perlstein, Kelly Phenix, Ray Rocchetti, Dr. Jeffrey Shelton, Janine Sullivan Wiley, Lori Szczygiel, Susan Walkama, Jesse White-Frese, and Alicia Woodsby

BHP OC Administration

Co-Chair Representative Phil Miller convened the meeting at 2:08 PM. He asked the Council to approve the September summary. A motion was made and all voted in unanimously in favor to accept the summary as written.

Action Items

No Action Items this month.

Connecticut Behavioral Health Partnership Agency Reports Department of Social Services (DSS)



Bill Halsey said there was no formal department update but he talked about smoking cessation group billing codes have been established for community behavioral health providers and he is trying to get hospitals included with CMS approval. After the meeting, Janine Sullivan Wiley served cake in honor of Bill implementing the new codes.

Department of Mental Health and Addiction Services (DMHAS)

With the departure of Jennifer (Hutchinson) Black from Sate Service, Colleen Harrington has been appointed the Interim Director for the Managed Services Division for DMHAS. Thank you Jennifer for your service and congratulations Colleen! Colleen gave a brief update on the Behavioral Health Home model. The Department has developed a State Plan Amendment that includes a fiscal model. The State Department is still in negotiations and discussions around that model. DSS has committed to set up an appointment for the state partners to talk with CMS at the end of this month.

Department of Children and Families (DCF)

Dr. Karen Andersson said the upcoming Child/Adolescent Quality, Access & Policy Committee meeting will be dedicated to the different changes taking place in DCF and its' current existing projects. One big change is that Deputy Commissioner Janice Gruendel has stepped down from the Department to assume some other responsibilities in the private sector and Michael Williams, Hartford Regional Administrator has been moved to the Deputy Commissioner's position. There also have been subsequent shifts in the Department to accommodate various vacancies and new positions.

Presentation and Discussion- Inpatient Adult Dashboard- Interactive Tool Ray Rocchetti, Wally Farrell and Lori Szczygiel -CT BHP Value Options



Lori Szczygiel, CEO of Administrative Service Organization (ASO) Value Options introduced Ray Roccetti (Director of Data Management and Analytics) and Wally Farrell (Business Intelligence Developer) for their presentation of the Interactive Tool for the Adult Inpatient **Dashboard** (see slides above). A dashboard is real time ability that pulls current information from authorization files to have an understanding of what is happening at that time for inpatient psychiatric unit and detox services from across the State of Connecticut. With claims based data by itself, there is a delay and is not real time. The dashboard can trend and track of what is happening and was designed for the acute in-patient units to understand what is happening relative to the population which they are serving, what type of Medicaid, and what type of service(s) they are receiving. Also, the dashboard can track length of stay and re-admission, by insurance-type and by age. This information can show what may driving the re-admission and length of stay of patients across the state. It also provides an opportunity to compare and contrast. This is important because the dashboard can give reviews of re-admissions for any facility, not just to a particular facility. Both Steve Merz (YNHH) and Dr. Charles Herrick were had questions and concerns with re-admission rates. Sherry Perlstein wanted to know if other trends were tracked, i.e. suicide attempts. Lori answered, "Yes, other life events are tracked in different data bases and outcome measures and can be compared and analyzed for a more complete (multi-dimensional) picture". They are working on building the infrastructure so that these data bases work together to get a more holistic understanding to see if people are getting better. This will make information have a multiple lens instead of just being flat. Peggy Hardy from St. Vincent's Behavioral Health says that she has used the child/adolescent dashboard for a while now and it has been very useful for her organization and she is now looking forward to using the adult dashboard too if for no other reason than to have more information that they already did not have but in particular for re-admissions rates. Co-chair Jeff Walter asked Lori what other dashboards are being worked on. Lori replied that authorization data is quick but claims based data is older data and not quite actionable data to impart today. They are still in a discovery phase but all information may not be impactful. However, VO has updated its website to have a more interactive impact. There are also quarterly executive summaries for the adult side and the child side. Co-chair Jeff Walter asked Lori how are the two ASOs (Value Options and CHNCT) sharing information and working together. Lori replied that information is shared and a number of programs are working well together, and when doing co-management with care coordination (behavioral health and physical health) for individuals on a case by case basis, the impact is astounding, i.e. quality of life, self-being, re-engaging in the community are very positive and re-admissions are significantly down overall.

Committee Reports

Child/Adolescent Quality, Access & Policy: – *Sherry Perlstein, Hal Gibber, and Robert Franks, Co-Chairs*

Sherry Perlstein reported that the last committee meeting was on September 20, 2013. The presentation was on a Review of Emergency Departments Data including admissions, demographics, length of stay, and discharge delays. She said that DCF is going from reviewing quantity data to really developing a better understanding of the population in trying to develop data on interventions and services that are really effective in reducing the use of EDs. Also included, was a comprehensive statewide Continuum of Care Behavioral Health Services report (September 20, 2013 Child/Adolescent Quality, Access & Policy Committee Summary and Presentation on the BHPOC Website). The next committee meeting will be on Friday, November 15, 2012 at 2:00 PM at VO in Rocky Hill and agenda items will include an overview to changes at DCF, a presentation on the School Based Diversion Initiative, and updates on Access Mental health and other PA 13-184 Initiatives, and on the CONNECT Federal statewide system of care planning grant award.

Coordination of Care: - Sharon Langer, Maureen Smith, Co-Chairs

Co-chair Sharon Langer informed the Council that her Co-chair, Maureen Smith was home feeling better and comfortable, recuperating after an illness and sent around a card for members to sign that wishes Maureen a speedy recovery. The last committee meeting which meets jointly with MAPOC's Consumer Access Committee was on September 25, 2013. Topics included CHNCT/VO Co-Management of Depression and for Maternal Screening Depression and Non-Medical Emergency Transportation (NEMT). During outreach for general screening, certain questions trigger follow-up for specific outcomes, response, and recommendations by one or both of the ASOs. Both Mary Ann Cyr (CHNCT) and Steve Moore (VO) feel that his is a good partnership and is working well between the two ASOs. For NEMT, Sharon said that DSS had agreed to meet with a small group of members prior to the November meeting to review and discuss proposed regulations before it would go into implementation and publication, however, the meeting was delayed and has not yet been re-scheduled. Therefore, the next scheduled meeting for November 20, 2013 is canceled and the next committee meeting will now be on January 22, 2014. *From previously: Consumers who are still experiencing difficulty with transportation appointments can call Logisticare at 1-888-248-9895; HUSKY Health at 1-800-859-9889 for accessing health services, coordination of care, and to file a NEMT complaint.

Adult Quality, Access & Policy: - Howard Drescher, Heather Gates, and Alicia Woodsby, Co-Chairs

Heather Gates reported the sub-group met in October for the Health Home design with DMHAS but the model is not ready yet because DSS and DMHAS has not been able yet to reach an

agreement on the financial model related to Behavioral Health Homes. They are waiting to hear from SAMHSA/CMS to review the financial model. The state is ready to move on this by January 1, 2014 and Heather hopes to present the BHH Model to the Council in December. With this in process, the committee has suspended all remaining meeting dates until the work on Behavioral Health Homes is completed.

Operations: - Susan Walkama and Terri DiPietro, Co-Chairs



Co-chair Susan Walkama reported that the committee continues to review the new guidelines for prescription providers (non-Medicaid providers providing scripts and not being signed up as Medicaid providers). They are trying to ensure the many physicians who currently prescribe get enrolled in Medicaid to ensure that Medicaid recipients maintain continuity of care that they require. The committee is also reviewing the new guidelines for spend-down policy changes in terms that as January 1, 2014, there will be no spend-down for HUSKY D members. Councilmember Kelly Phenix talked about the Medicare Shared Savings Program and said the workgroup should look into that. Susan said that Bill Halsey is working on getting smoking cessation group billing codes for hospitals. The Outpatient Work Group has met four times so far and they are currently looking at other state models and what outcomes in terms of access and satisfaction will make the lives of children and families better (see letter above from Rick Calvert) which will be the focus of the next meeting. Bill Halsey (DSS) said much work needs to be done and asked LOC Workgroup members to work together and not to lose ground for what has been done thus far.

Other Business/Adjournment

Co-Chair Representative Phil Miller asked for further comments, questions, or other business.

Steve Merz (YNHH) asked for follow-up from the Oversight Council on the new law requiring mandatory reporting of the voluntary admissions to Psychiatric Hospitals for inpatient levels of care. He has been involved through the Connecticut Hospital Association (CHA) and other groups and is trying to better understand this and he is concerned about the implications on access to services for those with acute Psychiatric inpatient needs. He is not sure how to process this but he would like to request that DMHAS, the agency in charge of implementing this, be requested to provide a formal overview of this system known as "VATS" at an upcoming meeting of the Oversight Council as part of the agency updates. DMHAS has developed the database and is familiar with the tracking and the letters and he thinks it would potentially answer a lot of questions that the Oversight Council members have asked him about what this is, why it's here and what the implications are. He also said the good news may be that parity regulation has gone into effect and may have a positive impact to access to services to those with commercial insurance.

Hearing nothing else, Co-Chair Representative Phil Miller thanked everyone for attending and adjourned the Council meeting at 3:49 PM.

Next Meeting: Wednesday, December 11, 2013 @ 2:00 PM 1E LOB