Integrated Behavioral Health in RI

Care Transformation Collaborative of Rhode Island

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CARE TRANSFORMATION COLLABORATIVE RHODE ISLAND

pcmh kids patient-centered medical home

ADVANCING INTEGRATED HEALTHCARE

CTC-RI Overview

- **Vision:** **Rhode Islanders enjoy excellent health and quality of life**.
- **Mission:** **To lead the transformation of primary care in Rhode Island in the context of an integrated healthcare system**; and to improve the quality of life, the patient experience of care, the affordability of care, and the health of populations we serve.
- **Approach**: **CTC-RI brings together key stakeholders** to implement, evaluate, refine and spread models to deliver, pay for, and sustain high quality comprehensive primary care.

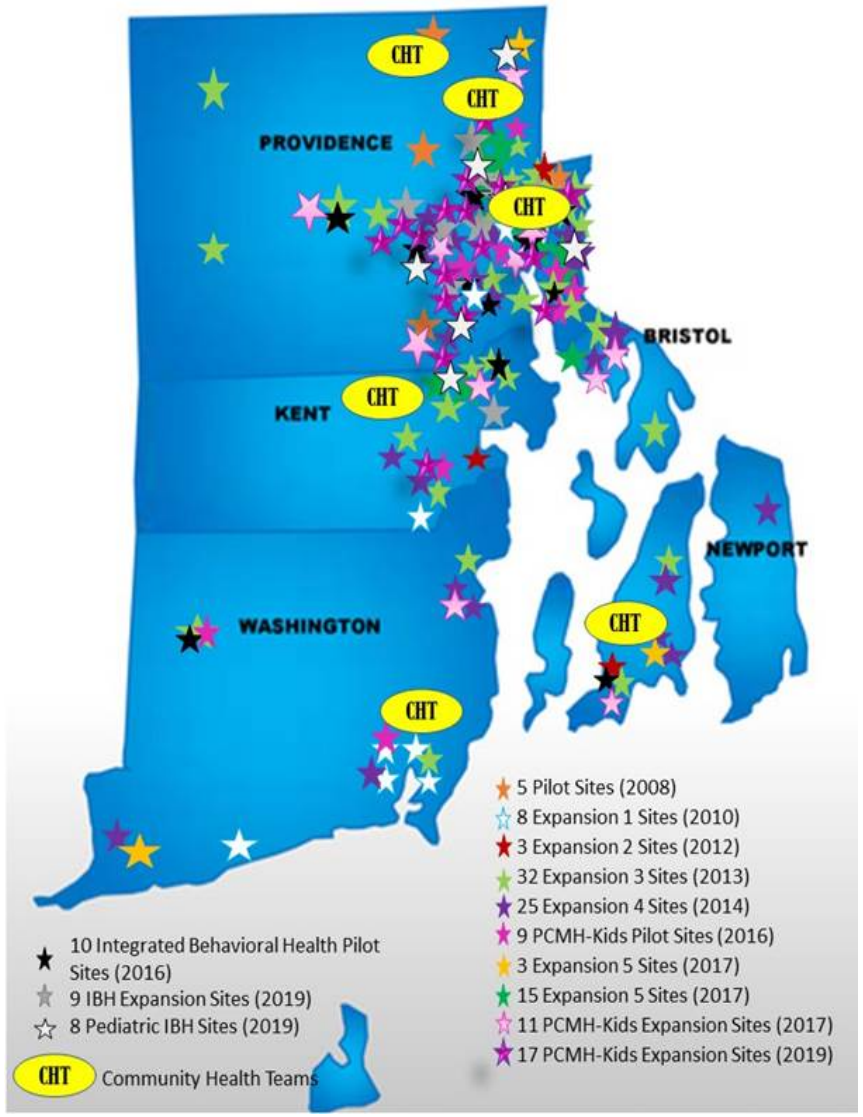
CTC-RI Goals

- Increase Capacity and Access to Patient-Centered Medical Homes (PCMH)
- Improve Quality and Patient Experience
- Reduce Cost of Care
- Improve Population Health
- Improve Provider Satisfaction (“Fostering joy in work”)

Expanding PCMH

- The Care Transformation Collaborative of Rhode Island has a growing impact across the state, and includes:

- **128 primary practices**, including internal medicine, family medicine, pediatric practices and **29 primary care practices** which are part of the Integrated Behavioral Health initiative.
  - Over **700,000 Rhode Islanders** receive their care from one of our practices.
  - **800 providers** across our adult and pediatric practices.
  - Investment from **every health insurance plan** in Rhode Island, including private and public plans.
  - **All Federally Qualified Health Centers** in Rhode Island participate in our Collaborative
  - $217 million reduction in total cost of care dollars in 2016 compared to non-patient centered medical homes in Rhode Island, according to data from the state's All-Payer Claims Database.



Integrated Behavioral Health Project Goals and Audience

Goal 1: Reach higher levels of quality through ***universal screening***

Goal 2: Increase access to ***brief intervention*** for patients with moderate depression, anxiety, SUD and co-occurring chronic conditions

Goal 3: Provide ***care coordination*** and intervention for patients with high emergency department (ED) utilization /and behavioral health condition

Goal 4: ***Increase patient self care*** management skills: chronic condition and behavioral health need

Goal 5: Determine ***cost savings*** that primary care can achieve by decreasing ED visits and inpatient hospitalization

Target Audience(s): Ten Patient Centered Medical Home (PCMH) primary care practices serving 42,000 adults

Lessons Learned

New Unmet or Changing Needs

- **Copays** are a barrier to treatment
- **Billing and coding** difficult to navigate
- Workforce Development IBH **practice facilitators** and IBH clinicians

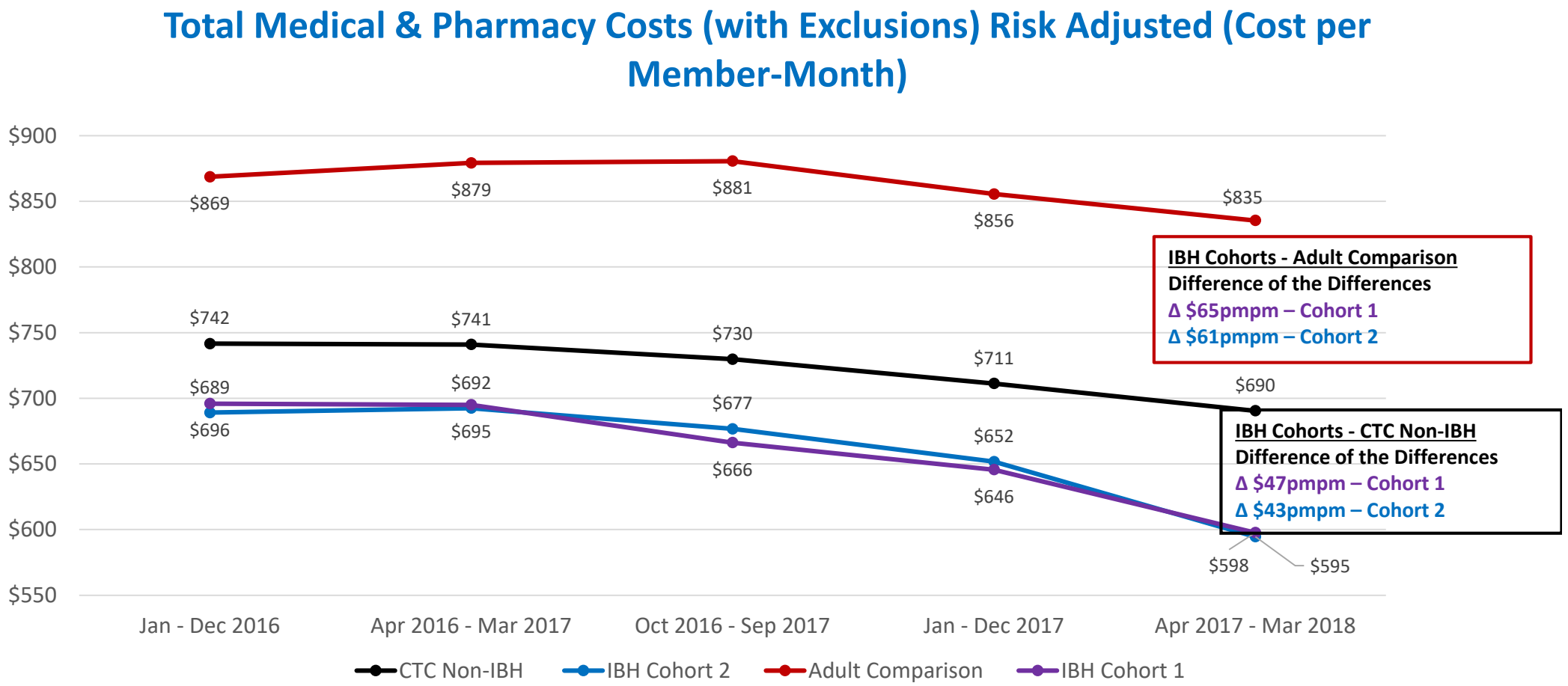
Things to Do Differently

- Give practices 3 to 6 months to **prepare for implementation**
  - ✓ Billing and coding
  - ✓ Credentialing
  - ✓ EHR modifications
  - ✓ Workflow
  - ✓ Staff training

What Would Be Helpful Post-Pilot

- **Build workforce** for Integrated Care
- **Pilot APM** for IBH in primary care
- **Leverage legislative action**; 1 copay in primary care; treat screenings as preventive services
- Address needs of **small practices through CHT**

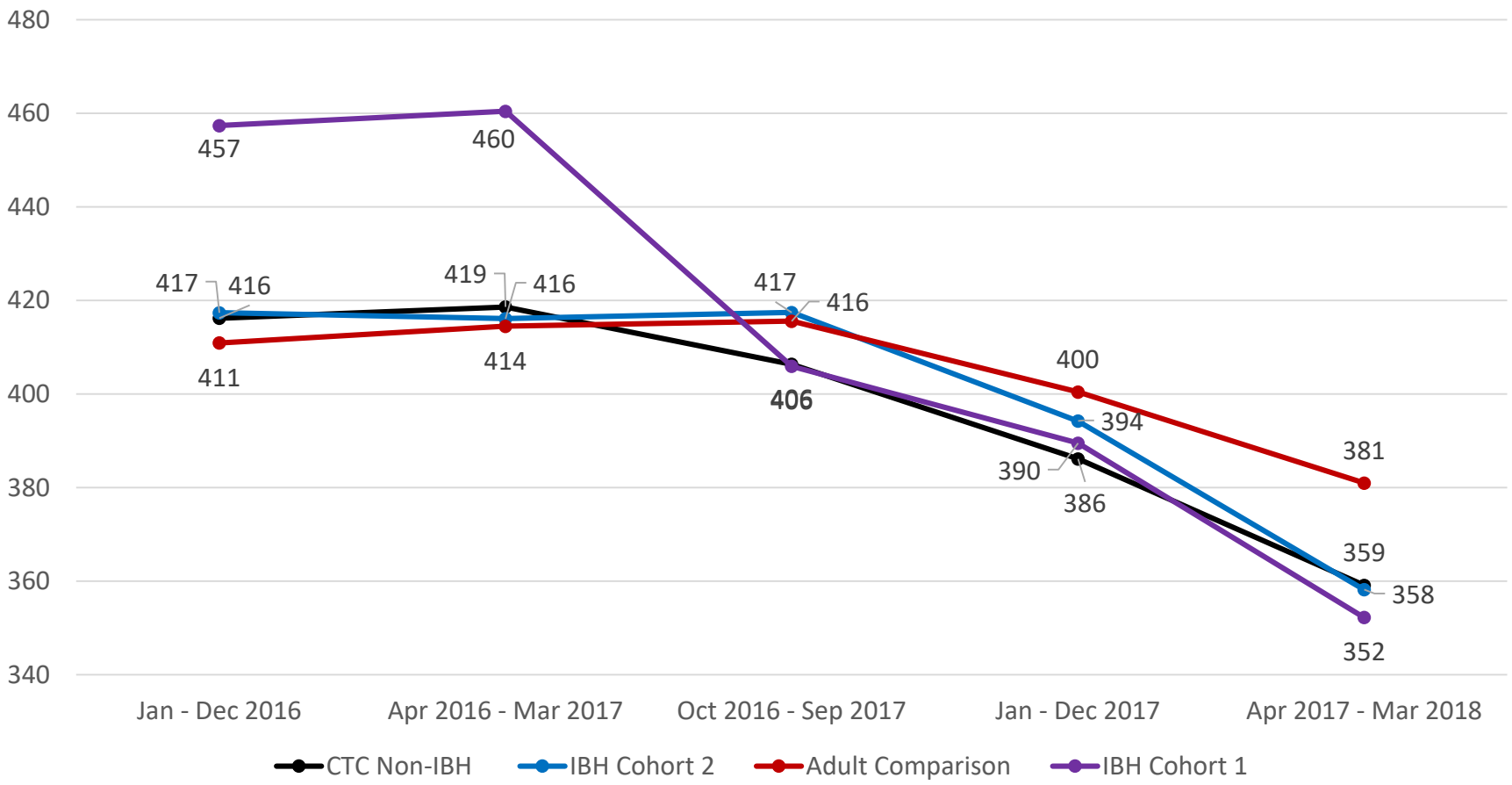
Better Care - Lower Costs



Data Source: Rhode Island All-Payer Claims Database

Emergency Department Visits

Risk Adjusted (Visits per 1,000 Member-Years Count)



BROWN

Brown University Findings
Using a "matched" comparison group

Overall, analysis suggests positive effects of IBH intervention

	Cohort 1	Cohort 2
<u>Utilization</u>		
ED Visits	↓ 12%*	↓ 20%*
Office Visits	↓ 50%*	↓ 25%*
<u>Costs</u>		
Total Cost of Care	↓	↓
ED Costs	↓	↓
Rx Costs	↓	↓
Professional Services	↓	↑

* Statistically significant p-values

Better Care Through Workforce Development : IBH

Wendy Phillips

Jennifer Etue

Kristin David

- **3 Practice Facilitators specifically trained within IBH in Primary Care**
  - 6 months Didactic and Experiential training
  - Backgrounds include psychology, social work and marriage & family therapy
  - 3 PCMH sites are receiving practice facilitation services over 1-year period

Represents the first training of its' kind in the country

- *This program was made possible through the support of the RI Foundation and RI College.*

Better Care Through Workforce Development : IBH

With funding from: TUFTS Health Plan

- **Trained 3 additional IBH Practice Facilitators**
- **Developed Online web-based IBH Practice Facilitator Training program**
  - **Consulted with John Snow, Inc., educational content experts**
  - **Applied content to a learning platform and integrated live "filmed" presentations of Dr. Nelly Burdette.**
  - **Incorporated homework assignments, reference manual and monthly conference calls**
  - **Advanced onsite shadowing option available**
  - **Received NASW approval for 6 CEU credits**
  - **Four candidates applied in the Spring 2020**

Pediatric IBH Expansion

With funding from:

RHODE ISLAND FOUNDATION

UnitedHealthcare

TUFTS Health Plan

- **3-year program; 2 waves of 4 pediatric practices**
- **Leveraging key learnings and resources from adult pilot program**
- **Tailoring specifically to pediatrics**
  - **Child Psychologist for practice facilitating services**
  - **Pediatric relevant screening measures**
  - **Pediatric specific content expertise**

Next Steps / Sustainability

- Quantitative Evaluation - Brown University – APCD data using a matched comparison group
- Partnering with Systems of Care: spread across the life cycle
- Payment Reform: IBH Alternative Payment Model
- Legislative Action: co-pay and credentialing
- New IBH Initiatives
  - NCQA Behavioral Health Distinction
  - Behavioral Health Telemedicine
- Educate: Present and Publish

Main Takeaways

Integrated Behavioral Health in Primary Care Works
Improved access, patient care & reduces costs

Onsite practice facilitation by IBH subject matter experts supports culture change for successful implementation

More action is needed

- APM for Integrated Behavioral Health in Primary Care
- Continue workforce development

Questions

Contact: CTCIBH@ctc-ri.org

Learn more about CTC and IBH:
https://www.ctc-ri.org/integrated-behavioral-health

Learn more about IBH Practice Facilitator Training:
https://www.ctc-ri.org/integrated-behavioral-health/online-ibh-practice-facilitator-training