

DBHDD Behavioral Health Provider Overview



DBHDD

***BRIEF ORIENTATION FOR NEW PROVIDERS
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Environment for Community Behavioral Health

- * Higher Acuity Treated in Community Outpatient Settings
- * Briefer Hospital Stays
- * Best Practices & Fidelity to Treatment Models
- * Accountability for Outcomes
- * Affordable Care Act
- * C&A Managed Care

Landscape of Provider Network

A network of Community Behavioral Healthcare Providers that is:

- * Safe
- * Accessible
- * Efficient
- * Effective (positive clinical outcomes)
- * Financially and Administratively Stable
- * Accountable
- * Competent (workforce)

Landscape of the DBHDD

A Department that is:

- * Efficient
- * Fiscally Responsible
- * Focused on Quality
- * Accountable
- * Engaged in Workforce Development (Competency Building)

The Provider Network

- * Region 1: 22 Core Providers
- * Region 2: 16 Core Providers
- * Region 3: 102 Core Providers
- * Region 4: 9 Core Providers
- * Region 5: 14 Core Providers
- * Region 6: 21 Core Providers

Total: 184

Challenges & Opportunities

Variability in the Network

- ❖ Volume of “Core Providers ” does not necessarily equal capacity
- ❖ Service array varies across the network
- ❖ Significant variance in infrastructure

Challenges & Opportunities

Accountability to Fund Sources

- * Various fund sources
- * Federal block grant, state appropriations and Medicaid
- * Ensuring existing funds are appropriately utilized
- * Eliminating waste, fraud and abuse

Challenges & Opportunities

Enhancing basic network infrastructure

- * ADA Settlement services are major enhancement to services for certain population
- * Core service infrastructure needs attention and funds are limited

Understanding the System

- * The Tiered System Design
- * Provider Standards
- * Key Performance Indicators (KPIs)
- * Compliance & Monitoring

Tier 1, Tier 2 & Tier 3

Tier 1: CCP

- * Strengthening the Public Safety Net

Tier 2: CMP

- * Ensuring Choice
- * Quality Improvement

Tier 3: Specialty Network

- * An array of specialty treatment and support needed in the continuum of care

Tier 1: Comprehensive Community Provider (CCP)

CCPs function as the safety net for the target population, serve the most vulnerable and respond to critical access needs. Community Service Boards will serve in this capacity. The CCPs will:

- * Be a Community Service Board
- * Serve as the Safety Net for individuals identified as high risk and vulnerable
- * Serve children, adolescents, emerging adults, and adults

Tier 1: Comprehensive Community Provider (CCP)

- * **Have Electronic Information Systems capability (Electronic Health Records, HIE connectivity)**
- * **Competently serve individuals with co-occurring Behavioral Health & Developmental Disabilities; and**
- * **Competently serve both individuals with Mental Health conditions, Addictive Diseases and dually diagnosed MH/AD conditions**

Tier 1: Comprehensive Community Provider (CCP)

- * Offer essential core benefit package **plus** designated specialty services
- * Have an active Board of Directors
- * Be the clinical home for individuals enrolled in their services
- * Receives DBHDD Funds to support infrastructure needed to be a Safety Net Provider

Tier 2 – Community Medicaid Provider

**CMP providers offer choice for consumers with Medicaid.
Required to:**

- * Offer the essential core benefit package of services**
- * Serve Medicaid-covered individuals**
- * Serve Both MH & AD Individuals**

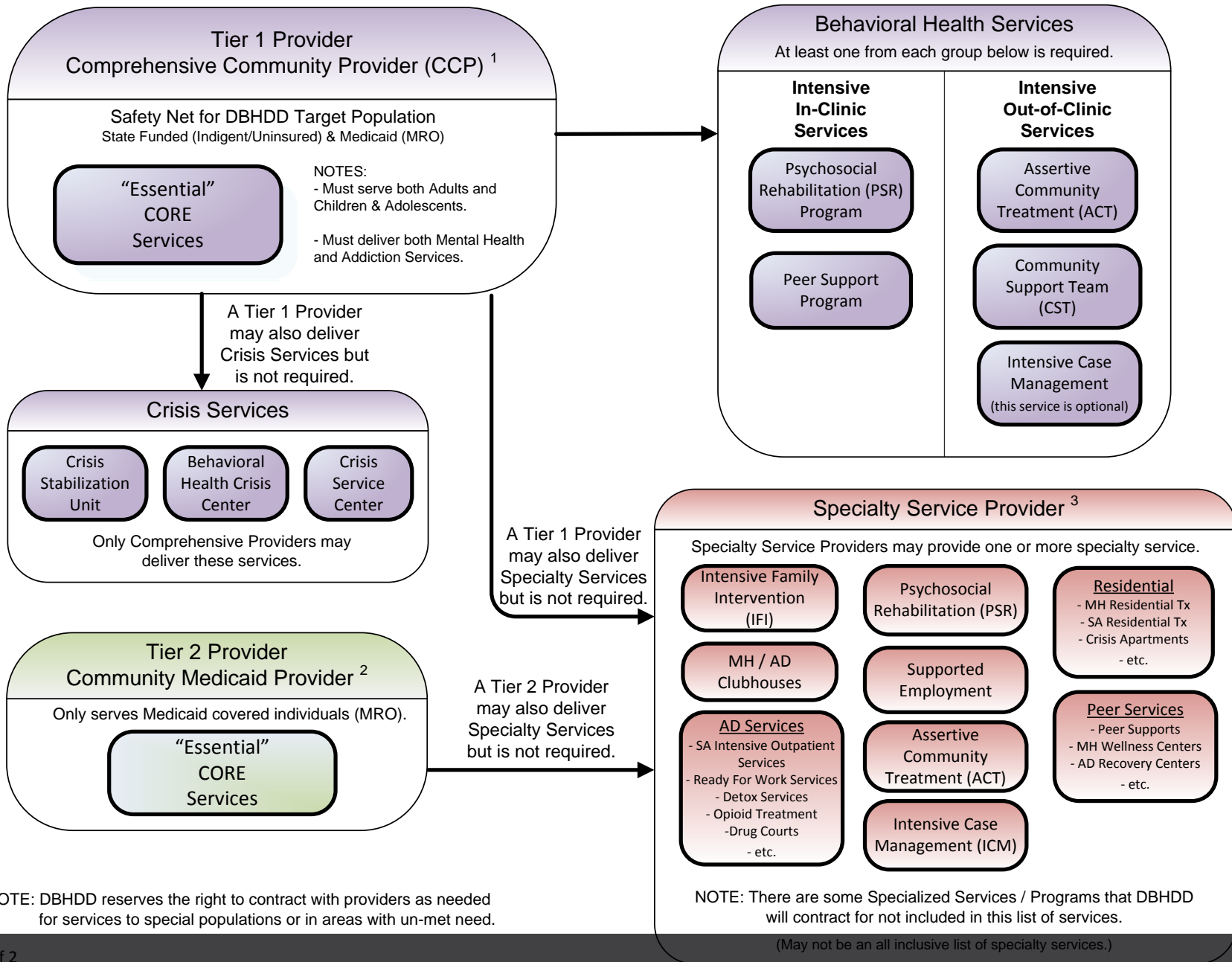
Tier 2 – Community Medicaid Provider

- * May also offer Specialty Services (not mandated)
- * May be age-focused (i.e. Only C&A or Only Adults, or Both)

Tier 3 – Specialty Providers

This includes, but is not limited to:

- * Intensive Intervention Services
- * Assertive Community Treatment
- * MH & SA Clubhouses
- * Peer Services
- * Psychosocial Rehabilitation
- * Supported Employment
- * Addictive Disease Specialty Treatment
- * Residential Services



NOTE: DBHDD reserves the right to contract with providers as needed for services to special populations or in areas with un-met need.

Service Delivery

CORE BENEFIT PACKAGE

SERVICE	ADULT MENTAL HEALTH	CHILD & ADOLESCENT MENTAL HEALTH	ADULT SUBSTANCE USE DISORDER	CHILD & ADOLESCENT SUBSTANCE USE DISORDER
Behavioral Health Assessment / Service Plan Development	X	X	X	X
Psychological Testing (may be contracted out)	X	X	X	X
Diagnostic Assessment	X	X	X	X
Crisis Intervention	X	X	X	X
Psychiatric Treatment	X	X	X	X
Nursing Assessment & Health Services	X	X	X	X
Medication Administration	X	X	X	X
<i>Pharmacy & Lab Services</i>	X	X	X	X
Community Support Individual / Case Management / PSR-I	X	X	X	X
Individual Outpatient Services	X	X	X	X
Group Outpatient Services	X	X	X	X
<i>Legal Skills – Forensics/Competency</i>	X		X	
Family Outpatient Services	X	X	X	X
Addictive Disease Support Services			X	
Peer Support Individual	X		X	

Provider Standards

- * Tier 1 CCPs AND Tier 2 CMPs will be required to operate in Compliance with the applicable Standards. The Standards are intended to provide clear guidance for providers on the expectations of operating as a CCP or a CMP.
- * Tier 1 Standards can be found in PolicyStat: Policy #01-200 <https://gadbhdd.policystat.com/policy/992494/latest/>

Tier 1: CCP Standards

- * Administrative/Fiscal Infrastructure (15%)
- * Eligibility for Community BH Services (*not weighed*)
- * Access to Services (14%)
- * Crisis Management (10%)
- * Addictive Disease Treatment & Supports (8%)
- * Screening & Assessment (8%)

Tier 1: CCP Standards

- * **Transitioning Individuals in Crisis from Inpatient & Crisis Stabilization Care (9%)**
- * **Community Behavioral Health Services (10%)**
- * **Staffing (pass/fail)**
- * **Sub-Contracts (Pass/Fail)**
- * **Accreditation, Certification & Licensing (Pass/Fail)**

Tier 1: CCP Standards

- * **Audit Compliance (10%)**
- * **Training (3%)**
- * **Quality Management (3%)**
- * **Benefits Eligibility (5%)**
- * **Recovery Oriented Care (Pass/Fail)**
- * **Services for Deaf/Hard of Hearing (5%)**

Tier 2 & 3 Standards

- * Tier 2 standards will be published ASAP with a go live of July 1, 2015.
- * Tier 3 standards are service specific, thus, standards for the services already exist.

Compliance & Monitoring

- * Providers are **required** to operate in compliance with the respective Standards.
- * Each standard, where applicable, has key performance indicators that identify targets for expected outcomes.
- * Providers will be evaluated on their performance to the overall standards annually. (with a mid-year progress review)

Final Key Points

- * When available, gain an understanding of the standards and the provider's ability to meet them.
- * Review the DBHDD Provider Manual and Services.
- * Ensure you will be able to serve **both** AD & MH populations
- * Offer the **full array** of services of the Core Benefit Package
- * Ensure competency in best practices for community care for the target population is in place.

Questions

