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**Sustaining Health Integration
Activities**

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The PBHCI Sustainability Checklist

- What is it?
- How do you use ?

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**Today's Focus: Getting Started in Addressing Key
Elements of Sustainability**

- Are you participating in your state's health home discussions?
- Is there a local integrated health committee working on this process?
- Is integration part of the service every consumer receives? Are consumer wellness programs part of your service array? Are consumers trained in Whole Health Action Management?
- Have you completed your clinical work flow diagrams?
- Have you walked through your workflow and identified who, can pay for each step of your process - with your clinical and billing staff at the same time?

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Your State's Health Home Discussion

State	Population	Providers	Enrollment	Payment	Geog. Area
Idaho	SPM or SED; Diabetes or Asthma; DM and at risk for another chronic condition	Current Healthy Connections Providers	Self referred or referred by provider; opt out	PMPM for comprehensive care mgmt services	Statewide
Iowa	Two chronic conditions or one and at risk for another includes hypertension	All primary care and CMHCs	Opt in at providers office	PMPM with performance based payment in 2013	Statewide
Missouri	SPM only and MH or SA plus one chronic condition; MHSa + tobacco	CMHCs	Auto-assigned with opt out	PMPM	Statewide
Missouri	Physical Health	Primary care	Auto-assigned with opt out	PMPM	Statewide
New York	SMI, Chronic Medical and BH conditions	Any providers meeting criteria	Auto-enroll with opt out	PMPM based on regions, case mix	Statewide

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State	Population	Provider	Enrollment	Payment	Geog Area
North Carolina	Two chronic medical conditions or one and at risk for another	Medical Homes	Voluntary through Community Care North Carolina	Tiered PMPM with add on payments for specialized support	Statewide
Ohio	SPM and SED	CBHCs	Opt out	PMPM	Targeted to 5 counties - statewide year 2
Oregon	Statute based plus Hep C, HIV/AIDS, kidney disease and cancer	PCP/CH at Tier 1, 2 or 3 or PCPs meeting state criteria	Opt out	PMPM based on Tier	Statewide
Rhode Island	SMI or SED; two chronic conditions; or one and at risk of another; specific conditions	CEED-HR Family Centers	Voluntary	Alternate payment methodology	Statewide
Rhode Island	SPM	7 CMHO and 2 smaller mhps	Auto- assigned with opt out	Case rate	Statewide

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Local Integrated Health Committees

- Anyone have one now?
- What's Working?

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Local/State Integrated Health Committee

Key partners:

- Hospital or health system
- Health Department
- Mental Health
- Addictions
- Consumers
- Advocacy Organizations
- State
- Primary Care Association or local FQHC

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Health and Wellness

Consumer Involvement – Who’s Doing it Well?
What are the key elements for success?

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Health Promotion and What We Know

Most likely to be effective:

- Longer duration - 24 weeks
- Manualized combined education and activity-based approach
- Both nutrition and physical exercise
- Evidence-based (proven effective by RCTs)

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"Building a Window into your Business Processes"

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Why look into your business processes?

- Efficiency, effectiveness and quality of care
- Impossible to know the "where" and the "how" until you know "what" you are doing now and "why" it is being done that way
- Unwise to start changing processes until you see the whole picture



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How Behavioral Health Business Processes Evolve



- In response to system drivers
- In some degree of isolation from each other
- Over long periods of time and multiple staff turnovers

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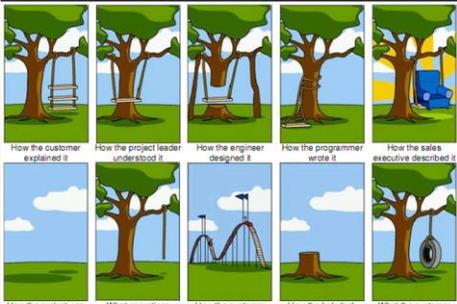


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Clinical/Financial Workflow

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Communication Between Disciplines is Challenging



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How the customer explained it
How the project leader understood it
How the engineer designed it
How the programmer wrote it
How the sales executive described it
How the project was documented
What operations installed
How the customer was billed
How the helpdesk supported it
What the customer really needed

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Who Participates in the Meeting

- Two clinical staff
- Two finance staff
 - Conservative
 - Creative
- Administrative Person that Can Approve it On the Spot
- Facilitator - Optional

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Formal Business Process Analysis Supports Clear, Precise, Accessible Communication

- Step-by-step financial, clinical and practice management activities
- Promotes cross-discipline understanding of each step
- Connects multiple dimensions –billing, data collection and reporting, clinical services, practice management, etc.
- "Requirements Traceability Matrix" - what you do and why you do it

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How It's Created

Step 1 – Build the Workflow Diagram

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Snapshot of "As Is" Workflow

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Option 2: Sample Document in the Packet

- The JC approach modified by KR
- Always, always start with the consumer needing services
- Try to keep it on one page

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Step 2 - Build the Business Process Analysis Document

- **Translate**
 - Build the step-by-step narrative
 - Include the roles
 - Identify associated forms / EHR screens / Reports
 - Product is "Business Process (BP) Narrative"
- **Analyze**
 - For timing
 - Billing
 - Appropriate roles and role-related issues
 - Data collection points
 - Physical space

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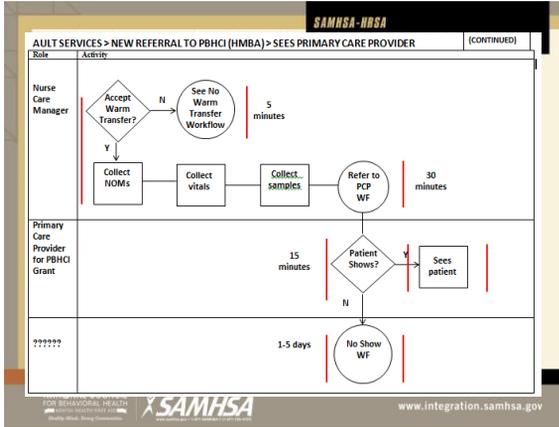
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ADULT SERVICES > NEW REFERRAL TO PBHCI (HMBA) > SEES PRIMARY CARE PROVIDER

Role	Activity
Mental Health Professional	<p>Decision: Patient interested?</p> <p>If Y: Refer to PBHCI for screening (10 minutes)</p> <p>If N: Document for follow up</p>
Wellness Educator	<p>Activity: Contact patient (1-5 Days)</p> <p>Decision: Able to contact?</p> <p>If N: See "Can't Contact" workflow</p> <p>If Y: Decision: Shows for Appt.?</p> <p>If N: See "No Show" Workflow</p> <p>If Y: Activity: Conduct screening (20 minutes)</p> <p>Decision: Elig.?</p> <p>If N: See "Not Eligible" Workflow</p> <p>If Y: Decision: Eligible?</p> <p>If Y: Activity: Conduct Warm Transfer to Nurse Care Manager</p> <p>If N: See "Eligible" Workflow (20 minutes)</p>

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Analysis Examples

- Timing**
 - How long are activities within the process taking?
 - How much time passes between activities?
 - How long are the patient contact intervals within Intake? Between Intake and Re-assessment?
- Billing**
 - What are the billable/non-billable events?
 - Is there a way you can make non-billable events billable?
 - How do these events match up to the appropriate license/credential of the role? Are you maximizing the amount of reimbursement?
- Role License and Credentials**
 - Is license/credential appropriate to the task?
 - Do the license/credential and task maximize billing?


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More Analysis Examples

- Resources**
 - Are licensed/credentialed (and therefore expensive) staff answering the phone when they could be conducting billable services?
 - Are particularly responsible staff being over-utilized?
 - Are two roles being implemented by one staff?
 - What happens when critical staff go on vacation or take leave?
- Data collection points**
 - For the PBHCl grant?
 - For Meaningful Use?
 - For other reporting requirements and quality improvement activities?
- Physical locations**
 - Does the physical layout support the workflow?
 - Is one workflow being conducted over multiple locations? How does this impact the workflow?


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Back Up to the Diagram – Option 2

- Word document in the packet
- Add financing to the process

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What Next?

- Make list of workflows around each of these five high level processes (we all do the same things) – or just 1?
 - Screening
 - Intake
 - Assessment and Evaluation
 - Treatment
 - Discharge
- Start with HIGH LEVEL Workflows for each
- Use the forms (screens) that are completed during workflows as a guide to ensure everything is addressed
- Drill down into the high – level processes for discrete workflows

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What to Expect

- **Tips**
 - Be prepared for tedious work the first few rounds – staff get more skilled as you progress
 - Ask questions as though you were going to step in and do the work yourself
 - Be prepared with forms, organizational charts, updated policies and procedures
 - Have an agenda and a time limit with processes outlined
 - Don't change processes until you have a full picture
 - Follow staff around to see if this is what they REALLY do
 - Avoid talking about the "To Be" state until you have finished the "As Is" snapshot, or you will waste time

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NOW – DO IT!
**Jeff, Aaron, Kathy, Colleen
Available to Help**

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Report Outs

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**Creating Your Action Plan for
Sustainability**

Review Action Plan Checklist in Packet

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**Start Developing Your
Sustainability Action Plan at this
Meeting!**

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