



SAMHSA-HRSA Center for Integrated Health Solutions

Partnering with FQHCs

**Arlington County Community Services Board &
Community Health Network Foundation**

Tuesday, August 12, 2:45-3:45pm



SAMHSA-HRSA Center for Integrated Health Solutions

Partnering with FQHCs: challenges and rewards

Justine Larson, MD, MPH
Basim Khan, MD, MPA

Presenters:



Justine Larson, M.D., M.P.H., M.H.S. - Medical Director for the Arlington County Community Services Board and Assistant Professor of Psychiatry at Johns Hopkins School of Medicine, Division of Child and Adolescent Psychiatry. She is the co-chair for the American Academy of Child and Adolescent Psychiatry committee on systems-of-care. In her current role as Medical Director for a county behavioral health system, she has gained experience in integrated primary care, evidence-based medication management in the seriously mentally ill population, and organizational management in behavioral health settings.



Basim Khan, MD, MPA- is a primary care physician and medical director at Neighborhood Health, a Federally Qualified Health Center (FQHC) in northern Virginia. Dr. Khan received his undergraduate education from Brown University, medical degree from the University of California, Los Angeles and residency training at the University of California, San Francisco, in a primary care track based at San Francisco General Hospital.

SAMHSA-HRSA
Center for Integrated Health Solutions

NATIONAL COUNCIL
FOR BEHAVIORAL HEALTH
MENTAL HEALTH FIRST AID
Healthy Minds. Strong Communities.

Substance Abuse and Mental Health Services Administration
SAMHSA
www.samhsa.gov 1-877-SAMHSA-7 (1-877-726-4727)

www.integration.samhsa.gov

Integrated primary care and behavioral healthcare

- A New Lease on Life
- PBHCI Cohort V
- Project is a partnership between the Arlington and Alexandria Community Services Boards (CSBs) and Neighborhood Health, Inc.



SAMHSA-HRSA
Center for Integrated Health Solutions

NATIONAL COUNCIL
FOR BEHAVIORAL HEALTH
MENTAL HEALTH FIRST AID
Healthy Minds. Strong Communities.

Substance Abuse and Mental Health Services Administration
SAMHSA
www.samhsa.gov 1-877-SAMHSA-7 (1-877-726-4727)

www.integration.samhsa.gov

**SAMHSA-HRSA
Center for Integrated Health Solutions**

Integrated primary care and behavioral healthcare

At the behavioral health center, Neighborhood Health provides:

- A family medical practitioner
- A nurse coordinator
- A medical assistant

**SAMHSA-HRSA
Center for Integrated Health Solutions**

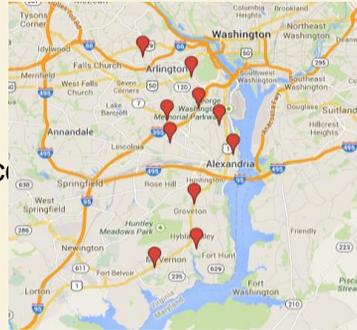
What is an FQHC?

- Receive funding under Federal Health Center Program (Section 330 of Public Health Service Act)
- Located in or serve high need community
- Governed by community board
- Provide comprehensive primary care & services that promote access to care
- Provide services available to all with fees adjusted based on ability to pay
- Meet other performance and accountability requirements

SAMHSA-HRSA
Center for Integrated Health Solutions

Neighborhood Health

- FQHC in northern Virginia
- 14,000 patients
- 10 sites
- 60% uninsured
- Medical, dental, behavioral health services



SAMHSA-HRSA
Center for Integrated Health Solutions

Neighborhood Health

Medical Services

- Primary care: adults, pediatrics, limited gynecology
- Approx 12.0 FTE medical providers
 - Physicians and nurse practitioners
- On site laboratory services

Dental Services

- Approx 3.0 FTE dental providers

Behavioral Health

- Approx 3.0 FTE Behavioral Health Counselors



**SAMHSA-HRSA
Center for Integrated Health Solutions**

Benefits of Partnering

- Licensing, regulations, can be complicated and new for behavioral health providers.
- Clients may benefit from reduced pharmacy rates that FQHCs can access
- FQHCs have long-standing expertise in providing primary care, while providing primary care may be new to behavioral health clinics
- FQHCs may be able to access higher Medicaid rates

**SAMHSA-HRSA
Center for Integrated Health Solutions**

History

- 2009 Executive Directors met, decided to collaborate
- 2010 Pilot grant for integrated care project awarded
- 2011 Set up initially memorandum of understanding – co-located care
- 2012 PBHCI grant awarded, formal contract developed

Challenges of partnering

The move from co-located care to integrated care!

- Two separate medical records
- Separate billing systems
- Different cultures, expectations, and ways of communicating
- Separate scheduling systems
- Unrealistic expectations from each partner

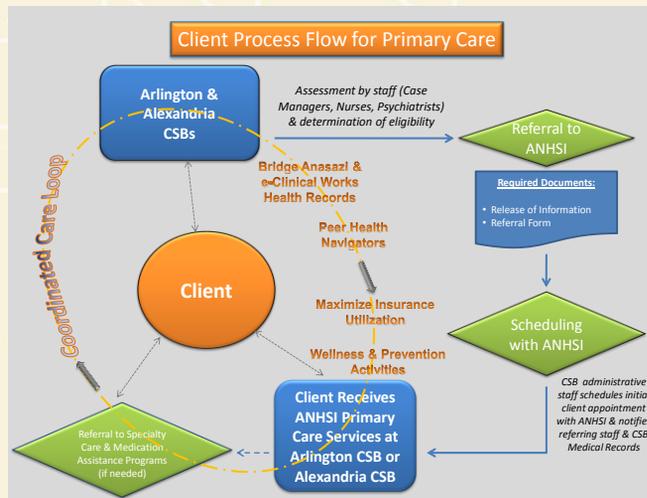
The ideal

High levels of integration

- Frequent communication between providers
- Integrated medical records
- Integrated calendar/ scheduling
- Coordinated billing systems

The ideal

SAMHSA-HRSA Center for Integrated Health Solutions



Ideal vs. reality

SAMHSA-HRSA Center for Integrated Health Solutions

- Ideal: fluid communication between providers
- Reality: communication is variable, and occurs frequently with some providers, less with others
- Solutions:
 - Get behavioral health email addresses for medical provider.
 - hold monthly meetings
 - teach providers how to identify who the clinicians are
 - cross training for behavioral and primary care providers

Ideal vs. Reality: Challenges and successes

- Ideal: integrated medical record
- Limitations:
 - two separate medical records
 - challenges with information exchange
- Solutions?
 - working on automating information exchange
 - currently depending on individuals to provide copies of notes
 - hired consultant to investigate work flow

Ideal vs. Reality: some of the challenges

- Ideal: integrated scheduling systems
- Limitations:
 - no electronic way currently to sharing calendars
- Solutions?
 - working on automating information exchange
- currently sharing print-outs of calendars to case managers, supervisors

**SAMHSA-HRSA
Center for Integrated Health Solutions**

Ideal vs. Reality: some of the challenges

- Ideal: integrated billing systems
- Limitations:
 - systems have separate financial requirements
 - clients have to give different types of information to different organizations
 - revenue from billing primary care not transparent to behavioral health systems
- Solutions?
 - working on automating information exchange
 - currently depending on individuals to provide copies of notes
 - ongoing collaboration between FQHC and behavioral health providers to agree upon true costs and revenue



**SAMHSA-HRSA
Center for Integrated
Health Solutions**

Putting all the Collaborative Pieces Together – IT'S ALL ABOUT SHARED VISION



Trusa Grosse, LICSW, LCSW
Kim Newlin
Kim Walton, MSN, APRN



**SAMHSA-HRSA
Center for Integrated Health Solutions**

Presenters:

Kim Newlin, Operations Director for The Jane Pauley Community Health

Center in Indianapolis, IN- Kim has a background in Business, Marketing And Development and has brought her diverse knowledge of Business Operations to JPCHC as a leader in the growing FQHC with a concern for excellence in patient care and patient experience.

Trusa Grosso, Senior Director of Outpatient Services with Aspire Indiana- She

holds a bachelor's degree from Rhodes College and an MSW from the University of Alabama. As a licensed clinical social worker, Trusa has over 30 years' experience as an administrator and clinician in various settings, including hospital administration, corrections, outpatient mental health services, integrated behavioral healthcare, and as a faculty member with the University Of Tennessee Department of Psychiatry.

**SAMHSA-HRSA
Center for Integrated Health Solutions**

Presenters:

Kim Walton - Clinical Nurse Specialist and Chief Clinical Officer in Behavioral Health Services for Community Health Network and Gallahue Community Mental Health Center

After completing her master's degree in nursing at Indiana University in 1996, Kim's clinical expertise has been focused in the areas of crisis intervention, trauma response, grief and loss, and integrated health care. Kim's current responsibilities focus is on incorporating the lessons learned from 29 + years of interest and experience using system of care values and principles, trauma focused care delivery, and the mind-body connection through integrated care delivery.

**SAMHSA-HRSA
Center for Integrated Health Solutions**

Who are we?

- Aspire Indiana – Community Mental Health Center
- Gallahue Community Mental Health Center
- The Jane Pauley Community Health Center
- Cohort VI



www.integration.samhsa.gov

**SAMHSA-HRSA
Center for Integrated Health Solutions**

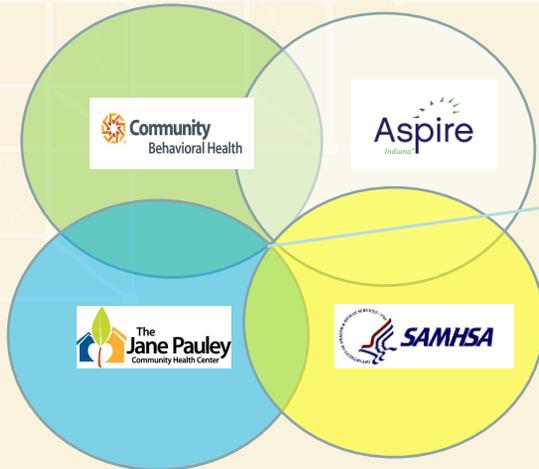
Who are we?



www.integration.samhsa.gov

**SAMHSA-HRSA
Center for Integrated Health Solutions**

Who are we?



The Client/Patient



**SAMHSA-HRSA
Center for Integrated Health Solutions**

IT'S ALL ABOUT SHARED VISION

Active clients with an SMI diagnosis

- Aspire Indiana – total of 1500
- Gallahue CMHC – total of 992
- High co-morbidity of serious mental illness and chronic health conditions
 - Early death
 - Complex care coordination needs
- Shared Vision – fully integrated and coordinated health care to address all complex health needs in a safe environment for the clients
- Value of PATIENTS FIRST

VICTORIES

- A strong and committed JOINT OPERATIONS LEADERSHIP team
 - Membership from all three organizations and Community Health Network Foundation
- Strong work teams with a member of JOL on each team
 - Operations
 - Integrated Care
 - Finance
 - Outcomes and Performance
 - Recruitment
 - Wellness
 - Information Technology

VICTORIES

- Hired a Nurse Practitioner with experience and passion for our patients
- Moved to common practices and common language at all sites
- Care coordination team – one key to recruitment
- AND MOST EXCITING VICTORY.....
- **WE MET OUR GOAL OF 200 ENROLLED PATIENTS**

CARE COORDINATION VICTORIES

Just a little more about CARE COORDINATION

- ✓ Key to client recruitment and engagement
- ✓ Care Coordinators – who are they?
- Lessons learned from our Care Coordination team
 - ✓ Remember the key mental health symptoms of our population
 - ✓ We need to understand the basics of primary care
 - ✓ Primary care providers are on our team – we are one
 - ✓ Primary health care becomes part of our overall individual care plan
 - ✓ Calls, reminders, check-ins and transportation are keys to successful engagement

BUMPS

- So it has not all been PERFECT ☺
- Our major *BUMPS* have been:
 - Early development of the shared vision took some time
 - Personalities, relationships and COMMUNICATION
 - Different internal infrastructures with three diverse organizations
 - Learning each other's cultures – behavioral health and primary care
 - AND INFORMATION TECHNOLOGY –by far wins the prize for most bumps!
 - ✓ Epic (Care Connect)
 - ✓ Epic (OCHIN)
 - ✓ MedInformatics

SAMHSA-HRSA
Center for Integrated Health Solutions

Key Take-Aways

- Relationships can make it or break it when it comes to collaborative partnerships
- Two-way communication from leaders to ALL staff and from ALL staff to leaders is an absolute must – especially in early stages of our project.
- Early identification of “bumps” through our work groups helped keep most “bumps” from becoming “mountains”
- Listening and understanding each agencies needs and challenges is time consuming and totally worth the effort
- A sense of humor is an absolute necessity
- **A STRONG AND PASSIONATE SISTERHOOD WITH A COMMON VISION CAN MAKE IT ALL HAPPEN!**

SAMHSA-HRSA
Center for Integrated Health Solutions

Contact Information:

- **Trusa Grosso,**
Aspire Indiana
(317) 587-0546
trusa.grosso@aspireindiana.org
- **Kim Newlin**
Jane Pauley Community Health Center
(317) 355-8699
Knewlin@ecomunity.com
- **Kim Walton – Chief Clinical Officer**
Community Health Network
(317) 621-5928
kwalt@ecomunity.com

**SAMHSA-HRSA
Center for Integrated Health Solutions**

Panel discussion

*Thank you for your attention –
Now it is time for YOUR questions and answers*

.....

NATIONAL COUNCIL
FOR BEHAVIORAL HEALTH
— MENTAL HEALTH FIRST AID —
Healthy Minds. Strong Communities.

Substance Abuse and Mental Health Services Administration
SAMHSA
www.samhsa.gov 1-877-SAMHSA-7 (1-877-726-4727)

www.integration.samhsa.gov