SAMHSA Primary and Behavioral Health Care Integration (PBHCI) HHS Regions 9 & 10 (West) Learning Community Meeting

HRSA Region X Update
March 23-24, 2014
Seattle, Washington

Healthy Communities, Healthy People

HRSA - America's Health Care Safety Net

Mission – To provide national leadership, program resources and services needed to improve access to culturally competent, quality healthcare.

– Improve Access to Quality Health Care and Services
– Strengthen the Health Workforce
– Build Healthy Communities
– Improve Health Equity

Budget - $10 Billion FY 2015
• 90+plus programs
• Over 3,000 grantees

Administrator - Mary Wakefield, PhD, RN, Administrator.

www.hrsa.gov
The Programs We Deliver

- Community Health Centers
- National Health Service Corps
- Workforce Training for Primary Care, Public Health, Medicine, Dentistry, Nursing, and Geriatrics
- Workforce Diversity
- Children’s Hospital GME
- Practitioner Databanks
- Maternal and Child Health
- Healthy Start
- Stop Bullying Now!
- Poison Control
- Ryan White HIV/AIDS
- Rural Health Policy & Programs
- Telehealth
- Health Care for the Homeless
- Migrant Health Centers
- Native Hawaiian Health
- Vaccine Injury Compensation
- Hansen’s Disease (Leprosy)
- 340B Drug Pricing
- Organ Donation & Transplantation
- And more…

The People We Serve

- 22 million patients served through over 9,000 health center sites, including 1 in 3 people with incomes below the poverty level.
- Over 500,000 people living with HIV/AIDS receive HRSA’s Ryan White services. Two-thirds are members of minority groups.
- 39 million women, infants, children, and adolescents benefit from HRSA’s maternal and child health programs.
- About 16,750 safety net providers participate in HRSA’s 340B program that provides access to discount drug purchases.
- More than 10,000 National Health Service Corps clinicians are working in underserved areas in exchange for loan repayment or scholarships.

HRSA Overview

Bureaus and Offices

HRSA’s Bureaus and Offices

Bureaus

Bureau of Health Workforce (BHW)
BCHS helps underserved communities and facilities experiencing critical shortages of health care providers recruit and retain clinicians through scholarship and educational loan repayment opportunities in exchange for service.

Bureau of Primary Health Care (BPHC)
BPHC funds Health Centers in communities, providing access to high quality, family oriented, comprehensive primary and preventive health care for people who are low income, uninsured, or living where health care is scarce. Health centers provide care on a sliding fee scale and see patients without regard for their ability to pay.

Healthcare Systems Bureau (HSB)
HSB protects the public health and promotes practices that improve personal health, including organ, bone marrow and cord blood donation, pharmacy and 340B drug pricing, Poison Control Centers, vaccine injury compensation, state health access, emergency preparedness facilities.
**HRSA Bureaus (continued)**

**HIV/AIDS Bureau (HAB)**
HIV/AIDS Bureau (HAB) administers The Ryan White HIV/AIDS Program, the largest Federal program focused exclusively on HIV/AIDS care. The program is for those who do not have sufficient health care coverage or financial resources for coping with HIV disease.

**Maternal and Child Health Bureau (MCHB)**
MCHB administers the Maternal and Child Health Block Grant to States and discretionary grants that ensure that the Nation’s women, infants, children, adolescents, and their families, including fathers and children with special health care needs, have access to quality health care.

**Offices:**

**Office of Regional Operations (ORO)**
ORO provides leadership and technical assistance through HRSA’s ten regional offices.

**Office of Rural Health Policy (ORHP)**
ORHP promotes better health care service in rural America.

**Other Offices**
http://www.hrsa.gov/about/organization/bureaus/index.html#bureaus

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**Ryan White HIV AIDS Programs**

The Ryan White Program works with cities, states, and local community-based organizations to provide HIV-related services to more than half a million people each year.

**Behavioral health conditions co-morbid in as many as 50% of HIV/AIDS patients (IOM, 2005)**

Ryan White Part C and Part D programs are required to provide comprehensive primary care, including behavioral health.

Mental Health Services are provided by:
- 73% of Ryan White Part C
- 54% of Part D health services organizations.

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**HRSA - Maternal and Child Health**

- HRSA MCH Programs serve more than 39 million women, infants and children annually.
  - Among the individuals served were 2.5 million pregnant women, 4.1 million infants, 27.6 million children, and 1.3 million children with special health care needs.
- HRSA Healthy Start- works to prevent infant mortality in 87 communities with infant mortality rates at least 1.5 times the national average.
- Educational Activities for Women in Areas with High Infant Mortality and Shortages of Health Care Providers.
  - Community-Based Outreach & Case Management
  - Behavioral Health Screening
  - 73% of Healthy Start program have formal smoking cessation programs
- Bright Futures Guidelines (Initiated by HRSA’s MCH Bureau):
  - More than 1.3 million copies of the guidelines distributed, which includes discussion on drug and alcohol use/screening of youth.
Maternal, Infant, and Early Childhood Home Visiting Program

- The Affordable Care Act creates a Maternal, Infant, and Early Childhood Home Visiting Program to fund States to provide evidence-based home visitation services to improve outcomes for children and families who reside in at-risk communities.
- Home visiting is a strategy that has been used by public health and human services programs to foster child development and address problems such as infant mortality.
- HRSA and ACF are working collaboratively on this program.

Health Professions Training Programs

The Bureau of Health Workforce addresses the nationwide shortage of primary health care providers through scholarship, loan and loan repayment programs that help underserved communities recruit and retain health professionals.

Behavioral Health Workforce Education and Training (BHWET) for Professionals
- Funds support pre-degree clinical internships and field placements for master's-level social workers, psychologists, professional counselors, psychiatric-mental health nurse practitioners, and marriage and family therapists; and, doctoral-level psychologists.
- National Center for Health Care Workforce and Analysis
- Area Health Education Centers (AHEC)

Educational Loan Repayment Programs:
- National Health Service Corps Loan Repayment Program
- NURSE Corps Scholarship and Loan Repayment

National Health Service Corps

Bureau of Health Workforce recruits fully-trained professionals to provide culturally-competent, interdisciplinary primary health and behavioral health care services to underserved populations. In return, the NHSC programs assists in the professionals' repayment of qualifying educational loans that are outstanding.
- 80% stay in the underserved area after fulfilling the NHSC service commitment.
- Today, more than 9,200 Corps clinicians are providing care to approximately 9.7 million patients at over 4,900 sites across the country who live in areas where health care is hard to find, which are known as Health Professional Shortage Areas (HPSAs). 28% of NHSC Corps clinicians provide behavioral health services, including: psychiatrists, clinical psychologists, clinical social workers, licensed professional counselors; marriage and family therapists and psychiatric nurse specialists.
- Washington State currently has 82 NHSC clinicians out of 245 providing mental health and behavioral health care services.
HRSA has funded a number of publications on behavioral health and substance use in rural America, including:

- Rural and Frontier Mental and Behavioral Health Care: Barriers, Effective Policy Strategies, Best Practices;
- Mental Health Care in Rural Communities: the Once and Future Role of Primary Care;
- Integrating Primary Care and Mental Health: Current Practices in Rural Community Health Centers (www.raconline.org)

- Rural Health Care Services Outreach Grant Program – expands health care delivery in rural areas. Funding may be used to conduct health screenings, health fairs, education and training, and any other health service delivery activity that does not involve inpatient care.
- Flex Rural Veterans Access Program.
- Telehealth Grant Programs.

Office of Regional Operations (ORO) works through HRSA’s ten regional offices to improve health care systems and America’s health care safety net, increase access to quality care, reduce disparities, and advance public health.

Regional Locations:
I. Boston - Region I
II. New York - Region II
III. Philadelphia - Region III
IV. Atlanta - Region IV
V. Chicago - Region V
VI. Dallas - Region VI
VII. Kansas City - Region VII
VIII. Denver - Region VIII
IX. San Francisco - Region IX
X. Seattle - Region X

Community Health Center Program
- Located in or serve a high need community - designated Medically Underserved Area (MUAs) or Population (MUPs).
- Governed by a community board composed of a majority (51% or more) of health center patients who represent the population served.
- Provide comprehensive primary health care
  - Primary & Preventive Care
  - Enabling Services
- Provide services available to all with fees adjusted based on ability to pay.
- Meet other performance and accountability requirements regarding administrative, clinical, and financial operations
- Required to provide mental health services or, at a minimum, to have formal referral arrangements.
Required and Additional Services

- Health center provides all required primary, preventive, enabling, and additional health services to meet the needs of the population it serves, either directly or through established written arrangements and referrals.
- Services should include referrals to other providers & specialists, case management, enabling services (outreach, transportation and translation), behavioral health services, recuperative care, and environmental health services, as appropriate.

Note: Healthcare for the Homeless Grantees must provide substance abuse services among their required services.

Health Center Program Overview
FY 2014 Active Grant Dollars

Washington:
- $9,062,241 active grants awarded as of 3/4/2015
- $75,228,273 awarded grants in FY2015** to 35 grantees through 44 grants
- $237,896,689 awarded grants in FY2014 to 52 grantees through 120 grants

Nationwide:
- $16,601,708,215 active grants awarded to date to 2,866 grantees through 6,488 grants
- $2,500,474,683 awarded grants in FY2015** to 1,651 grantees through 1,979 grants
- $7,759,494,668 awarded grants in FY2014 to 2,740 grantees through 5,573 grants

Behavioral Health in Health Centers

- **Access**
  - 1,119,706 patients received behavioral health services (2013)
  - 70% provide on-site mental health services
  - 40% provide on-site substance use services
  - 20% offer 24-hour crisis intervention services.
  - Screening, Brief Intervention, and Referral to Treatment (SBIRT) is a service that primary care providers provide

- **Workforce**
  - 6,545 Behavioral Health and Substance Abuse Workforce (2013)
    - Including: 486 Psychiatrists, 516 Psychologists,
    - 1,759 Social Workers, 1,266 Other Licensed MH providers and 1,643 Other Mental Health Providers and 853 Substance Abuse Providers

- **School-based Health Centers**
  - Approximately 2,000 health center sites nationwide
  - Generally includes primary care providers & mental health professionals in partnership

(Source: Uniformed Data System 2013)
Financial and technical assistance is available to qualified health centers who wish to gain recognition as a patient centered medical/health home through the National Committee for Quality Assurance’s (NCQA) Patient–Centered Medical Home program.

- Integrated and coordinated services
- Integrate Health Centers into local health systems
  - Specialists, ER, Hospitals, ACOs
  - Public Health, other CBOs

**Center for Integrated Health Solutions (SAMHSA/HRSA)**

- Jointly funded collaboration between HRSA & SAMHSA
- Promoting the development of integrated primary and behavioral health care services
- Technical Assistance and national Training Center on Primary and Behavioral Health Integration;
- Cooperative agreement with the National Council on Community Behavioral Health Care and a large cadre of partners.
- Provides Technical Assistance to SAMHSA’s Primary and Behavioral Healthcare Integration (PBHCI) grantees.

www.integration.SAMHSA.gov

*Affordable Care Act, Section 2703 Health Homes (Medicaid)*

**Population Served**

- Eligible individuals are those with chronic conditions, meaning an individual who is eligible for medical assistance under the State plan or under a waiver of such plan and has at least
  - 2 chronic conditions; or
  - 1 chronic condition and at risk of 2nd chronic condition; or
  - 1 serious and persistent mental health condition

- Chronic conditions must include:
  - A mental health condition
  - A substance use disorder
  - Asthma
  - Diabetes
  - Heart disease
  - Being overweight, as evidenced by having a BMI >25

- PCHH must provide access to preventive services, MH & SUD services, care coordination and disease management.
**Required Services**

- Comprehensive care management;
- Care coordination and health promotion;
- Comprehensive transitional care, including appropriate follow-up, from inpatient to other settings;
- Patient and family support (including authorized representatives); and
- Referral to community and social support services, if relevant;
  - (Use of health information technology to link services, as feasible and appropriate.)

**BH Integration Issues**

- Behavioral and physical health providers are training and operating in separate silos
- Provision of services – coordinated, co-located, integrated
- Health Center Program Requirements
- Medicaid Same day billing
- Facility Licensure
- HiPAA vs. 42 CFR Part 2, EHR
- ACA – ACO’s, Medical Home, Essential Health Benefits
- Workforce – Rural, billing issues
- Tele-Behavioral Health (billing, licensure)

**HRSA- Key Web Resources**

- [HRSA’s Funding Opportunities](http://www.hrsa.gov/grants/index.html) (Competitive Grants):
- [HRSA Behavioral Health Webpage](http://www.hrsa.gov/publichealth/clinical/BehavioralHealth/index.html)
- [HRSA Grantees with Active Projects by Program or State](http://granteefind.hrsa.gov)
- [HRSA’s Find a Health Center site](http://findahealthcenter.hrsa.gov)
- [National Health Service Corps (NHSC)](http://nhsc.hrsa.gov)
- [HRSA’s Databank of HRSA programs](http://datawarehouse.hrsa.gov)
Some of our State Partners

NW Regional Primary Care Assn.
www.nwrpca.org

Primary Care Office
• Washington State Dept. of Health:
http://www.doh.wa.gov/ForPublicHealthandHealthcareProviders/RuralHealth/AboutUs/PrimaryCareOffice

State Office of Rural Health
• Washington State Dept. of Health:
http://www.doh.wa.gov/ForPublicHealthandHealthcareProviders/RuralHealth/AboutUs/StateOfficeofRuralHealth

Questions?

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