



Osteopathic Heritage Foundation of Nelsonville
and the Alcohol, Drug Addiction and Mental Health Services Board
Serving Athens, Hocking and Vinton Counties

Integration of Behavioral Health and Primary Care Initiative

YEAR 2 PROGRESS REPORT
Strengthening Behavioral Health Service Delivery

FEBRUARY 2016





About the Funding Partners

The 317 Board designs policies, evaluates programs, accesses funds and monitors alcohol, drug addiction and mental health services in Athens, Hocking and Vinton counties. The 317 Board receives primary funding from the Ohio Department of Mental Health and Addiction Services, and local tax levies. Currently, the 317 Board contracts with twelve local agencies to provide a comprehensive offering of mental health, drug and alcohol addiction services throughout the three counties. For more information, visit www.317board.org.

The Osteopathic Heritage Foundation of Nelsonville (OHFN) advances programs and services designed to improve health and quality of life in southeastern Ohio. The Foundation pursues partnerships and opportunities to advance innovative solutions that demonstrate long-term impact for vulnerable populations, measurable outcomes, and sustainability. For more information, visit www.osteopathicheritage.org.

The 317 Board and the Osteopathic Heritage Foundation of Nelsonville would like to acknowledge and thank Ohio University's Voinovich School for Leadership and Public Affairs and Dr. Lesli Johnson, Associate Professor, for this report.

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INITIATIVE BACKGROUND

The Osteopathic Heritage Foundation of Nelsonville (OHFN) and the Alcohol, Drug Addiction and Mental Health Services Board Serving Athens, Hocking and Vinton Counties (317 Board) are pleased to share this progress report. It highlights a funding partnership related to the integration of behavioral health and primary care in southeastern Ohio during the second implementation year, September 2014 - August 2015.

Recognizing opportunities to advance integration efforts in southeastern Ohio, the OHFN and the 317 Board embarked on a multi-year funding partnership with the intent of improving the system of care and health outcomes for vulnerable populations. The partnerships promotes collaboration and sustainable innovations to address unmet behavioral and physical health care needs.

To positively impact system and client outcomes, the OHFN and the 317 Board have allocated funding and technical assistance to advance a strategy to support integration efforts in Athens, Hocking, and Vinton counties. With funding from the Osteopathic Heritage Foundation of Nelsonville, Woodlands Center and the Gallia-Jackson-Meigs Board of Alcohol, Drug Addiction and Mental Health Services joined as initiative partners.

To advance effective integration efforts in southeastern Ohio, the OHFN and the 317 Board designed an initiative to 1.) strengthen the service delivery capacity of behavioral health providers to partner with primary care, 2.) demonstrate the value of integration to sustain behavioral health capacity, and 3.) to ensure access to primary care for individuals with serious behavioral health diagnoses.

The Board and OHFN commend the initiative partners for their commitment and continued efforts to implement effective and sustainable integration strategies.

Jointly sponsored by the Athens, Hocking, Vinton ADAMHS Board and the Osteopathic Heritage Foundation of Nelsonville

Health Services Sponsor Organization

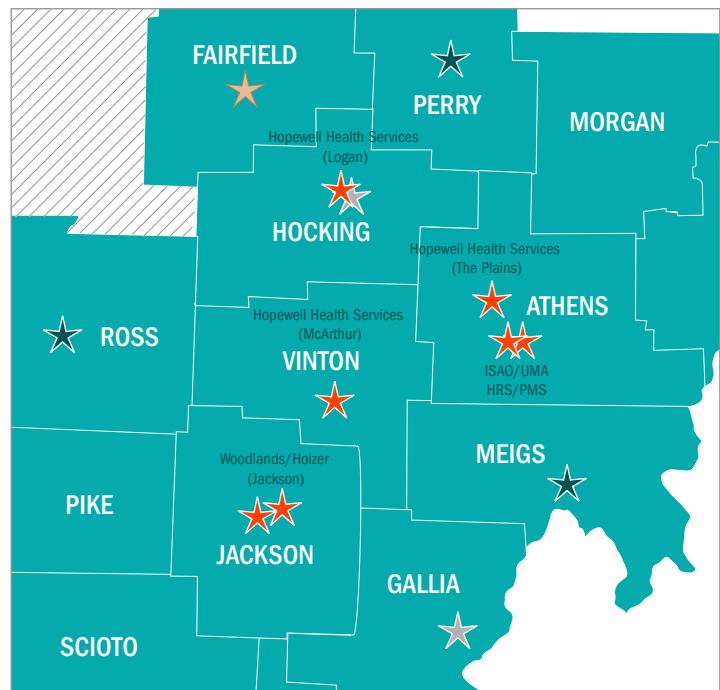
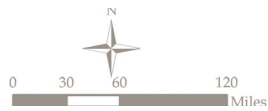
★ Initiative Sponsored Integrated Partnerships

Additional Integration Sites

★ Hopewell Health Centers

★ Health Recovery Services

★ Integrated Services



Source: Economic Status 2016 Appalachian Regional Commission
 Voinovich School of Leadership & Public Affairs • Ohio University 12/2/2015 • Bridget Lair, Senior Research Associate

INITIATIVE PARTNERSHIP OVERVIEW

The Integration Initiative has invested in a number of partners and various models of integration. Below is a description of the partnerships and above a map of the site locations funded through the initiative. The map also includes additional sites where the behavioral health agencies have partnered with other practices to expand integrated care.

Hopewell Health Centers:

Hopewell is a fully integrated care practice that resulted from the merger of Tri County Mental Health and Counseling and Family Health Services—a Federally Qualified Health Center. This initiative has supported two projects: Electronic Health Record implementation in behavioral health sites and psychiatric consultation for the primary care physicians at the Hopewell Health Centers clinics in Hocking, Vinton and Athens counties. Hopewell Health Centers has also added a primary care physician into their Athens behavioral health location and has behavioral health clinicians in primary care sites in Meigs, Ross and Perry counties.

Integrated Services and University Medical Associates Family Practice (UMA):

This partnership is an integrated and co-located care model between Integrated Services behavioral health clinicians and Ohio University Medical Associates primary care family practice clinic. Ohio University Medical Associates provides office space within the practice and has incorporated the behavioral health staff into exam and consultations. Integrated Services supports other co-located sites in Fairfield and Ross counties.

Woodlands Center and Holzer Health Care:

This partnership includes the co-location of behavioral health clinicians into the Holzer primary care family practice clinic. Woodlands has office space for their traditional mental health services on the same floor as the primary care practice at the Holzer Medical Center located in Jackson, and accepts referrals from additional sites in Jackson.

Health Recovery Services

“Some of our most challenging patients rarely left their home due to high levels of anxiety or depression and other normal activities of daily living were significantly impaired. Our partnership with OhioHealth O’Bleness has provided us access to these patients that are experiencing high behavioral health and primary care needs – so we can begin the healing and treatment process.”

Beth Schilling Plummer
Integrated Care Counselor
Health Recovery Services

Integrated Services and University Medical Associates Family Practice

Our co-location service with University Medical Associates provides access to patients in the exam room as well as private office space when more extensive patient consultation is needed – particularly in times of crisis. This arrangement allows us to work one-on-one with patients, while the physician is able to continue seeing other patients without delays.

Shelby Williams
Integrative Health Worker
Integrated Services

Health Recovery Services and OhioHealth O’Bleness:

This partnership is an integrated, coordinated care model between Health Recovery Services behavioral health clinicians and OhioHealth O’Bleness’ specialty pain services in Athens, Ohio. All new patients are screened and referred for behavioral health assessment and further services as needed. Health Recovery Services supports other integrated or co-located services: Ohio University Medical Associates Suboxone clinic and Ohio University Medical Associates Pediatric Medicine in Athens, Athens Medical Associates Cardiology and Obstetrics and Gynecology in Athens, and Stage Coach Family Practice in Hocking county.

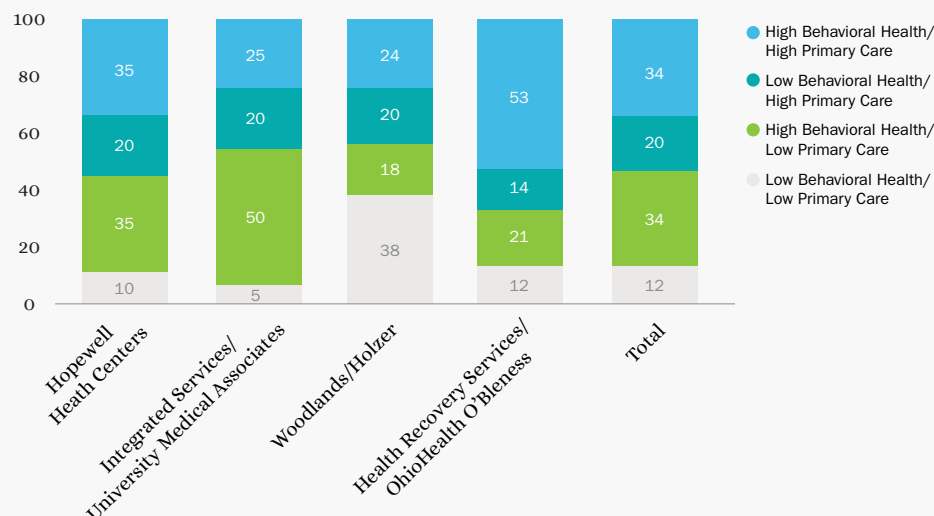
PATIENT PROFILE

Initiative partners have utilized defined quadrants developed by the National Council for Community Behavioral Healthcare to estimate current patterns of referrals for behavioral health services. The profile of patients served in Year Two is summarized in the table below.

Notable trends include:

- The projects estimate that 68 percent of the total served had high behavioral health care needs combined with primary care needs.
- Given the acute patient needs within the specialty pain management clinic, the highest percentage of patients with high needs in both behavioral health and primary care were reported at the Health Recovery Services/OhioHealth O’Bleness site (53%).

Percent Served by Quadrant



Mauer, B.J. (2009) Behavioral Health/Primary Care Integration and the Person-Centered Health Home. www.integration.samhsa.gov/BehavioralHealthandPrimaryCareIntegrationandthePCMH-2009.pdf

RESULTS AND PROGRESS

In the second full year of the Initiative, great strides have been made to improve the health of patients.

1530 people received integrated services through the four partnerships and seven sites.

- The integrated model increases access to behavioral health care – embedded behavioral health clinicians provide services to four patients for every one patient that can be served by traditional behavioral health services. Research supports that many people will approach their primary care provider when struggling with behavioral health concerns.
- Integrated care helps address unmet basic needs, such as food and help with utilities, that may be hampering successful medical treatment and management.

Behavioral health screens and data collection systems have been put in place across the initiative. Initiative partners routinely screen for depression and anxiety, and using valid screens to measure progress over time.

- Many of those identified and served by integrated behavioral health clinicians for problems with depression, anxiety, substance abuse and other mental issues had not received behavioral health services previously.
- Behavioral health clinicians assist patients with chronic illnesses as they seek to make lifestyle changes that promote health and chronic disease management, such as asthma, diabetes and heart disease. Brief interventions on smoking cessation, good nutrition, relaxation and stress reduction and other strategies help patients manage both their behavioral and physical health needs.

Effective, efficient communication and coordination between the Behavioral Health partners and the medical practices is a major impact of the initiative. There is a notable increase in both formal and informal communication and care coordination.

- Hopewell has made significant advances in the development of a shared Electronic Medical Record (EMR) across all services, including behavioral health services. While the other three partnerships continue to maintain separate records, all have found ways to share information regularly, using both informal and formal means. Behavioral Health Consultants report having easy access to the medical EMR and they regularly share their documentation with the medical providers and their notes become part of the patient's EMR.
- All partners report the regular use of case conferences or more informal “huddles” to review scheduled patients and to coordinate efforts to meet both medical and behavioral health needs. Behavioral health clinicians indicate the importance of the “warm hand off” of patients from the primary care team and the value of being able to initially meet patients in the exam room or during a physician visit. Acceptance of behavioral health services is greatly increased when the primary care clinician makes an immediate introduction of the behavioral health clinician. These hand offs are extremely effective in helping patients transition between providers.

Hopewell Health Centers

“The Integration Initiative is an example of community partners - private philanthropy, public sector agencies and non-profit health organizations – coming together to leverage resources for greater impact. For many years, we've worked with OHFN and the 317 Board, independently, and this Initiative has allowed us to participate in a larger effort with multiple partners through pooled resources and a streamlined process. In part, this Initiative has enabled us to effectively expand our the behavioral consultant model into other sites within our service area.”

Mark Bridenbaugh, CEO
Hopewell Health Centers



Some of the initial data suggests important impact that benefits health delivery systems and patient health:

- Initial evidence from the Woodlands/Holzer project suggests decreases in patient utilization of emergency rooms and urgent care facilities.
- The primary care and behavioral health staff from the Health Recovery Services/OhioHealth O’Bleness partnership, indicate that a number of patients are able to reduce their medications for pain and pursue alternatives, such as physical therapy, relaxation, cognitive strategies and other methods for managing pain.
- University Medical Associates reports reduced patient wait times since the start of the integration with Integrated Services’ behavioral health staff into the primary care clinic.
- Hopewell Health Centers estimates significant operational efficiencies from the increased access and decreased treatment costs for patients treated for behavioral health conditions through an integrated model.

OPPORTUNITIES AND NEXT STEPS

While much progress has been made in terms of building these partnerships, the sustainability of these efforts require an ongoing source of funding for these services. Integrated services are featured in the Ohio Governor’s Office of Health Transformation plan which includes value-based payments for medical care based on patient outcomes as well as increasing the number of billable codes to enable the addition of behavioral health services within the primary care practice. Additionally, the Ohio Mental Health and Addiction Services Department is exploring ways to simplify the intake requirements for Medicaid-eligible patients to receive behavioral health services. It is more important than ever to identify ways to use information about patient outcomes and systems changes to support the value and effectiveness of integrated care. Finding new ways to utilize information within the Electronic Medical Record to track patient outcomes is crucial.

Transition to a value-based payment system may provide both physicians and behavioral health providers with incentives to move toward integrated, sustainable practices. Partners in the current initiative are encouraged to demonstrate the value of integrated care in terms of better patient outcomes, decreased costs and increased access to needed services. In 2016, the funding partners will issue a Request for Proposals to support the partners in their efforts to demonstrate the value of integration to sustain needed behavioral health capacity.

