The Key to Holistic Treatment and Recovery for Individuals with Mental Illness

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Disclaimer

Texas is a work in progress. We haven’t found the answers but are making our way. Slow but steady.
If you’ve seen one Medicaid program, you’ve seen one Medicaid program. A little on the Texas specifics…
Texas Medicaid Managed Care

Percent of Medicaid Clients Enrolled in Managed Care

- 2015: 88%
- 2013: 80%
- 2011: 75%
- 2006: 65%
- 2001: 35%
- 1997: 15%
- 1994: 5%
## Medicaid Behavioral Health Services

<table>
<thead>
<tr>
<th>Carved In Services Prior to 2014</th>
<th>Carved Out Services Prior to 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Psychiatric Services</strong></td>
<td><strong>Mental Health Rehabilitation Services, including Targeted Case Management</strong></td>
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<tr>
<td>Licensed Professional Counseling</td>
<td></td>
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<tr>
<td>Inpatient Psychiatric Care (state/private hospital; children and adults)</td>
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<tr>
<td>ECI Services</td>
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<tr>
<td>Outpatient Substance Use Disorder Treatment including assessment, detoxification services, counseling treatment and medication assisted therapy</td>
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<tr>
<td>Residential Substance Use Disorder Treatment services including detoxification, substance use disorder treatment including room and board</td>
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Texas Path to Integrated Care
Multiple Efforts, One Goal

- Senate Bill 58
- STAR Health
- 1115 Transformation Waiver
- YES Waiver
- HHSC Behavioral Health Strategic Plan
A provider organization paved the way for integrating benefits

- **Access** to care when services are needed
- **Choice** in health plans and providers
- **Integration** of care at the plan and provider level
- **Local control** over important community decisions
- **Funding and management** through the 1115 Transformation Waiver
Texas Council Recommendations

1. Carve-in Medicaid covered behavioral health services into STAR and STAR+PLUS

   a) Ensure protection of vital Medicaid services for individuals with SMI through a designated benefit package and capitated rate

   b) Require plans to support and fund designated health homes for people with SMI

   c) Require a network of certified comprehensive MH providers

2. Retain local control over important community decisions through LMHAs

3. Strengthen community behavioral health services through the 1115 Transformation Waiver
1. Carve-in Medicaid covered behavioral health services into STAR and STAR+PLUS
   a) Two health home pilots in two service areas for people with SMI and one other chronic health condition
   b) Well-qualified and able providers to provide a comprehensive array of services
   c) Approach to treatment where the expected outcome of treatment is recovery

2. Creation of the Behavioral Health Integration Advisory Committee

3. SB 58 does not change LMHA provisions or conditions of the 1115 waiver
Behavioral Health Integration Advisory Committee

Required to submit formal recommendations on how to accomplish integrating behavioral and physical health within Medicaid managed care.

Recommendations in 8 focus areas:

- Holistic Treatment
- Member Activation
- Access
- Administrative Simplification
- Payment Mechanisms
- Outcome Measurement
- State Oversight
- Health Home Pilots

Recommendation Report and other information can be found at: www.hhsc.state.tx.us/about_hhsc/AdvisoryCommittees/bhiac.shtm
Implemented in April 2008, STAR Health is the Texas Medicaid managed care model designed to improve services and better coordinate care for:

- Children in state conservatorship
- Youth (18-22) who sign extended foster care agreements

In addition to all Medicaid-covered services, STAR Health provides:

- Immediate eligibility and access to a statewide provider network
- Increased focus on behavioral health services
- Service management and coordination teams
- Access to an electronic health passport through STAR Health’s electronic health information system
- Value-added and case-by-case added services that support foster placements

31,000 enrolled
An electronic health record viewable by healthcare providers, residential providers, Texas Department of Family and Protective Services staff, medical consenters, and Court Appointed Special Advocates (CASA) staff, which contains:

- A face sheet - displays a summary of care for each child
- Patient history module - displays a visit list for medical, behavioral health, vision, and dental
- Medications module - displays a list of medications filled
- Assessment module - displays healthcare service plans, psychotropic reviews, Texas Health Steps (EPSDT) exams, Child and Adolescent Needs and Strengths (CANS) assessments and more
- Additional detail is available in modules for contacts, allergies, immunizations, labs, growth chart, and appointments
- Health Passport is accessible by mobile device
MCO reviews the psychotropic regimen of all STAR Health members

Reviews can result in four determinations:

- Within parameters
- Outside parameters, but found to be within the standard of care
- Outside parameters, and there is opportunity to reduce
- Outside parameters, and there is risk for or evidence of significant side effects

PMUR expanded to all other Texas Medicaid managed care programs

### Outcomes Since 2005

- Overall use of psychotropic medications decreased by 48%
- Class polypharmacy and 5 or more concurrent psychotropics decreased by 74%
STAR Health: Psychiatric Diversion Program

Designed to decrease unnecessary acute psychiatric hospitalizations while improving placement stability

Three key components:

- Mobile crisis team with a licensed professional immediately evaluates the child in crisis and assists with stabilization
- Group home site provides crisis stabilization, intensive outpatient group programming, and individual and family therapy while services and training are provided to the family
- Child psychiatrist provides medication oversight and management

Available in Ft. Worth, San Antonio, Houston, and Abilene

<table>
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<tr>
<th>2015</th>
<th>Thru Q3 2016</th>
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<tr>
<td>Ft. Worth Inpatient Diversion</td>
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<tr>
<td>102 children and youth</td>
<td>112 children and youth</td>
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Case-by-case services are non-Medicaid services offered on a per case basis when medically necessary and cost-effective, and may improve the health status of the member:

- Equine therapy with Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) for youth who have frequent psychiatric admissions and have experienced trauma
- Trauma informed peer support for caregivers struggling with behavior supports for the youth in their home
- Practice visits to a dentist or OB/GYN when the actual visit may trigger a traumatic experience for the youth

Value-added services are non-Medicaid services or incentives that promote improved outcomes and are offered to all members for whom the service is appropriate
Texas made behavioral health a priority in DSRIP by allocating a minimum of 10% of DSRIP funds to community mental health centers.

25% of all 1,458 active DSRIP projects relate to behavioral health:
- Interventions to prevent the unnecessary use of services (criminal justice system, emergency departments)
- Enhance behavioral health availability
- Behavioral Health crisis stabilization services
- Integration of primary and behavioral health care services
- Behavioral health through telemedicine/telehealth

49 projects to integrate physical & behavioral health care
Youth Empowerment Services (YES) Waiver

Providing hope to families by offering services aimed at keeping children and youth in their homes and communities.

- 1915 (c) waiver providing comprehensive home and community-based mental health services to youth (ages 3 to 18) who have a serious emotional disturbance
- Flexible supports and specialized services to prevent institutionalization and/or out-of-home placement due to serious emotional disturbance
- Allows Texas to cover youth when living in the community who otherwise are not Medicaid-eligible
- July 2016 - CMS approved Texas adding children in foster care to the YES waiver

**Service Array**
- Adaptive aids and supports
- Community living supports
- Family supports
- Minor home modifications
- Non-medical transportation
- Paraprofessional services
- Professional services
- Respite
- Supportive family-based alternatives
- Transitional Services
Statewide Strategic Planning for Behavioral Health

In 2013, the Texas Legislature created the HHSC Office of Mental Health Coordination to:

- Provide broad oversight on public mental health policy
- Coordinate the policy and delivery of mental health services through the State of Texas
- Consult and coordinate with other state agencies, local governments, and other entities to ensure a strategic, statewide approach to mental health

In 2015, the Legislature created the Statewide Behavioral Health Coordinating Council comprised of all state agencies that receive funding for behavioral health

In 2016, HHSC presented a Strategic Plan for Behavioral Health across agencies and funding streams
Expected Outcomes
• Significant improvements in BH coordination across state agencies
• Maximize use of existing resources and services
• Address BH gaps identified through strategic approach
• More efficient and effective state government
• Ensure utilization of successful best, promising, and evidence-based BH services and service delivery
• Ensure prompt access to quality BH services

Texas Statewide Behavioral Health Strategic Plan (Fiscal Years 2017-2021):
Where are we headed next?

- Health Home Pilots
- Integrated Managed Care Organizations
- Value-based Payments
- DSRIP Renewal
Questions?

If you think of one later....

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