Integrated Health for individuals with Serious Mental Illness in Arizona

August 2013

Magellan Health Services of Arizona is the Regional Behavioral Health Authority for central Arizona, which includes all of Maricopa County and part of Pinal County. Funds for services are provided through a contract with the Arizona Department of Health Services/Division of Behavioral Health Services (ADHS/DBHS) and the Arizona Health Care Cost Containment System (AHCCCS).

CONFIDENTIAL & PROPRIETARY, © Magellan Health Services, 2013

Individuals with SMI…

- Die more than 30 years younger than their peers in Arizona;
- Frequently smoke tobacco… approximately 75% of the time;
- Are often overweight… including 40-60% of individuals diagnosed with schizophrenia;
- Have diabetes 15% of the time;
- Contribute to the 12 million visits annually to ERs by people with mental health and substance use disorders; *and*
- Often have co-occurring chronic health conditions… 70% of SMI individuals have at least 1 chronic health condition, 45% have two, and almost 30% have three or more.

MAGELLAN HEALTH SERVICES

CONFIDENTIAL & PROPRIETARY, © Magellan Health Services, 2013

Barriers to Integrated Health which negatively impact quality of care and clinical outcomes

- Social barriers
- Transportation
- Coordinated care reimbursement
- Inconsistent application of services to support self-management
- Inconsistent coordination between physical and behavioral health care systems

- Different levels of PCP experience managing patients with SMI
- Primary care office staff often not familiar with people with SMI
- Infrequent communication between BH and PH makes medical management of SMI patients more challenging
- Most case and disease management programs do not include people with SMI because of perceived engagement challenges

CONFIDENTIAL & PROPRIETARY, © Magellan Health Services, 2013

Integrated Health and Care Coordination

- To improve the life expectancy and quality of life for individuals with SMI, AHCCCS health plans, Magellan Health Services (RHBA), community based SMI clinics and primary care providers **are evolving a model of care that combines physical and behavioral health**;
- The model focuses on a recovery and strengths based approach to address the whole health of the individual, based upon risk levels and behavioral and physical health status.

- ***Integrated Health seeks to improve upon the existing coordination between physical and behavioral health care systems***

MAGELLAN HEALTH SERVICES

CONFIDENTIAL & PROPRIETARY, © Magellan Health Services, 2013

What is Integrated Behavioral Health and Primary Care?

- The intentional, ongoing, and committed coordination and collaboration between all providers treating the individual.
- Ideally, a designated team of behavioral and physical healthcare providers develop a common treatment plan that identifies and addresses both physical health and behavioral healthcare needs.
- Integrated care can occur when:
  - Behavioral health providers work alongside physical health providers in the same location; or
  - Behavioral health and physical health providers work in different settings but coordinate care through shared electronic medical records.

Arizona Dept of Health Services

CONFIDENTIAL & PROPRIETARY, © Magellan Health Services, 2013

Magellan's Care Coordination Program

- Physical (MIHS) and behavioral (adult SMI clinics) health are **co-located** for a collaborative partnership;
  - Currently there are six clinics, located throughout Maricopa county
- AND/OR
- Community based primary care (provider network), AHCCCS health plan, behavioral health (PNOs) and Magellan care coordination/UM team coordinate care
- Magellan staff support coordination of care for high risk recipients (i.e. hospitalized patients)
  - Support communication amongst providers (hospital, community, Plan level and behavioral health clinic)
  - Facilitate joint treatment planning between providers
    - PNOs contact facility – SNF or inpatient to discuss discharge plan and appropriate level of care/community living
    - PNOs fax medication sheets to inpatient facility. Ensure patient remains on psychiatric meds (peer to peer review of BH and PH meds as needed)
    - Support for follow-up appointments (behavioral and physical health)
    - Involve Health Plan Case Management to support transitions in care

CONFIDENTIAL & PROPRIETARY, © Magellan Health Services, 2013

On-site Primary Care is offered at the following SMI Clinics

Phase One – May, 2012

- CHOICES: South Center -
- People of Color Network: Comunidad
- People in Recovery: Metro
- Southwest Network: San Tan

Phase Two - 2013

- CHOICES: Midtown (AUGUST)
- PCN: Capitol (OPEN)
- PIR: East Valley (OPEN)
- SWN: Highland (AUGUST)

MAGELLAN HEALTH SERVICES

CONFIDENTIAL & PROPRIETARY, © Magellan Health Services, 2013

Integrated Health Tools – Samples of tools to support communication and coordination of care

Continuity of Care Document (CCD)

- The CCD specification is an XML-based markup standard intended to specify the encoding, structure and semantics of a patient summary clinical document for exchange. The patient summary contains a core data set of the most relevant administrative, demographic, and clinical information facts about a patient's healthcare, covering one or more healthcare encounters.

Whole Health Integrated Service Plan (WHISP)

- The WHISP allows **permitted providers** to view the behavioral integrated service plan (ISP) already in use by the SMI clinics with a new, **evidence-based** medical service plan. The goal of the WHISP is to close gaps in care and ensure evidence based treatment plans for all our recipients of care.

CONFIDENTIAL & PROPRIETARY, © Magellan Health Services, 2013

Integrated Health Tools (continued)

Care Coordination Plan (CCP)

- A way of planning, documenting and monitoring interdisciplinary support recipients with SMI. CCPs includes ADLs, barriers, treatment goals, gaps in care (PH + BH), home and community based services, episode specific interventions, team reviews and ongoing monitoring based upon risk and ongoing events. Available as a pdf or online.

After Visit Summary (AVS) (currently provided by MIHS at the PCP co-located offices)

- The AVS gives the patient (and family) a written summary of the important points of the clinical visit with the physician. The AVS includes height, weight, blood pressure, medications, new medications, lab work done today, and recommendations on when to return.

CONFIDENTIAL & PROPRIETARY, © Magellan Health Services, 2013

Integrated Health Tools (continued)

Health Risk Assessment

- Annual member assessment on a variety of functional, physical health and lifestyle issues. Currently completed annually by the PNO based behavioral health nurse. It has social connectedness and natural supports elements built in. The HRA is scored based upon responses and the score is fed into a population based risk stratification model.

Telephonic Staffing's

- Behavioral health and physical health care providers hold telephonic staffing's as needed to discuss complex patients and utilize the trusted relationships from the SMI clinic to help support recipients receive the medical care they need.

CONFIDENTIAL & PROPRIETARY, © Magellan Health Services, 2013

Success Stories: Provider Care Coordination

Case manager referred a man with a shoulder injury he had suffered during a biking accident weeks earlier. Patient was in pain and could not move his arm more than a few inches. A stat x-ray was ordered and the PCP's office coordinated with the patient, psychiatrist and case manager to get x-ray same day at CHC.

- Patient was diagnosed with a complete fracture of his right clavicle with displacement. He will need therapy and possible surgery as well as close follow-up, but with team approach, he will be able to address all of his health needs.

Juan is a 47 year old male who had surgery for a benign hip lesion In 2012. The Magellan care team coordinated with hospital Case Manager to transition the patient to a SNP and assure psych medications continued in the hospital. Hospital team was not aware he had SMI. RHBA team connected PPCP and CM with hospital CM for medication reconciliation. Patient was discharged to a SNP where he slowly started ambulating and was visited by his SMI clinic case manager. Stair training will be next.

CONFIDENTIAL & PROPRIETARY, © Magellan Health Services, 2013

Success Stories: Improved Access to Physical Health Care

Recipient had a complex skin lesion on her face that her CM had been concerned about awhile. The patient did not want the potentially cancerous lesion removed in the past. She was referred to the PCP for a physical but they discussed the skin lesion.

- The provider explained the need to have the lesion removed and biopsied, and the risk of not doing so. Patient refused the procedure.
- The NP coordinated with the CM and she was able to work with the patient over the next 2 weeks on the importance of having this done. At her next appt, she was ready to be referred to dermatology and to have the lesion removed. Team is awaiting her dermatology appt and her CM has agreed to accompany the patient.

- Sarah was seen at PCP office for a physical and a large, firm abdominal mass was palpated. The team worked her up and it was found to be ovarian and she was scheduled for surgery. Sarah has a strong support system including a foster mom and boyfriend. She resides in a Flex-Care setting.
  - The patient came in for a physical because her CM recommended it. It is difficult to say how long it may have taken her to seek care and how far advanced the mass may have been by then.

CONFIDENTIAL & PROPRIETARY, © Magellan Health Services, 2013

Strengths Based Interventions Leads to Improved Health Outcomes

One patient was referred by BH clinic to IHH clinic with diabetes. Her blood sugar was >450. Her medications were not adequate. She disclosed eating candy, soda and milk. Patient received diet, medication and exercise counseling.

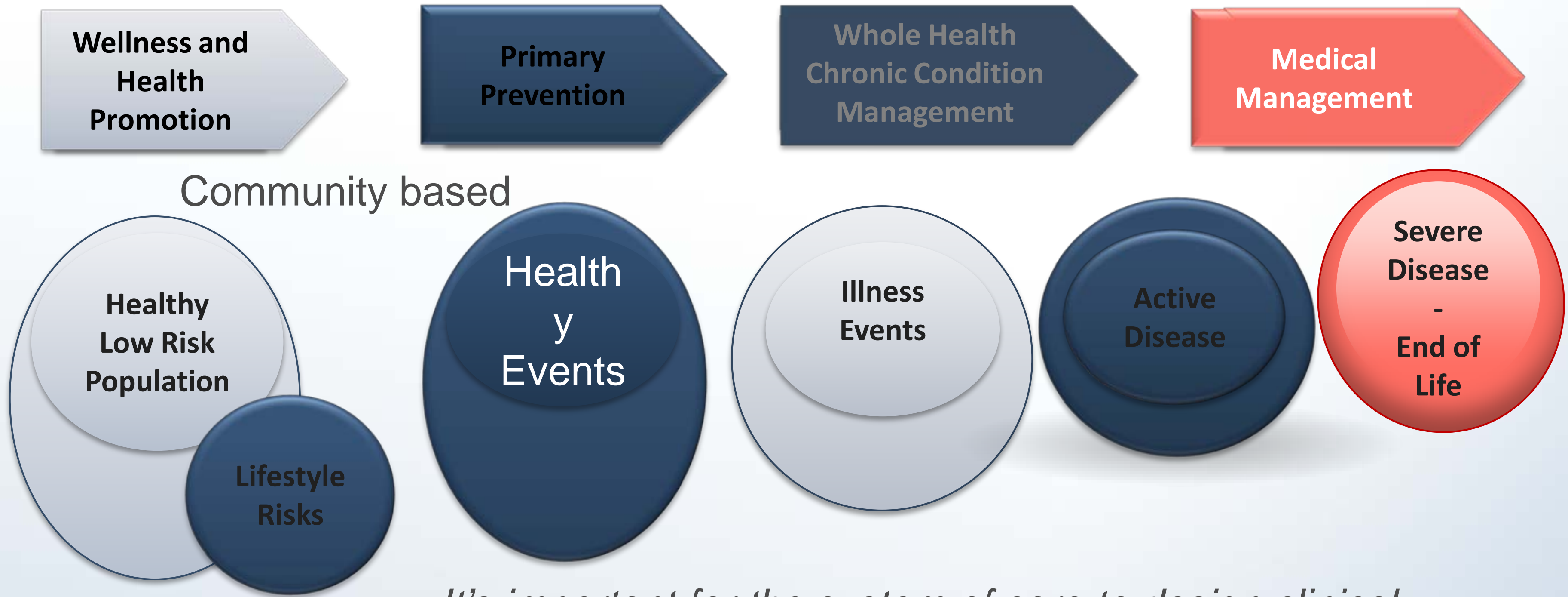
- Patient agreed to have labs drawn and a follow-up appointment. Client was contacted for high potassium and her case manager took her to the hospital where she was stabilized and discharged same day.
- On the next visit, she was drinking diet soda, had been walking daily and had already lost 3 lbs! Even though her blood sugar was still elevated, it was coming down and she said that she was already feeling much better.

The patient has many of the usual barriers to receiving care including transportation and fixed income but also suffered a traumatic brain injury during a past suicide attempt and had extremely garbled speech. The dedicated PCP MAs were able to work through this barrier and have been supporting him with scheduling appointments, transportation and explaining all orders. The patient's main complaint was scrotal swelling greater than one year.

Due to communication difficulties he was never able to follow up and believed that nothing could be done. On exam he had a very large hydrocele. These are very uncomfortable but treatable. The MAs continue to work with the patient and he will see urology. He frequently calls the office to check on the status of things.

CONFIDENTIAL & PROPRIETARY, © Magellan Health Services, 2013

Population Health Strategies for the SMI Population Across the Care Continuum



It's important for the system of care to design clinical programs that support Health and Self Care Management anywhere a consumer may be within the health care continuum.

MAGELLAN HEALTH SERVICES

CONFIDENTIAL & PROPRIETARY, © Magellan Health Services, 2013

Summary: Integrated Health for Titled SMI Population

- Focus is on behavioral health recipients who are high risk, have chronic conditions or lifestyle risks, are complex, with multiple medical conditions and who could use additional support
- Model Recovery and Resiliency principles
- Support self management
- Perform complex case management functions including supporting medication reconciliation
- Create Care Coordination plans that can be accessed by members of the multi-disciplinary team included the BHMPs and PCPs
- Support transitions in care through intensive discharge planning and support with post-hospitalization appointments
- Identify gaps in care for chronic conditions for all members
- Assist members in navigating the healthcare system
- Support interdisciplinary care meetings and communication

CONFIDENTIAL & PROPRIETARY, © Magellan Health Services, 2013