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ADVANCING INTEGRATED HEALTHCARE

# Best Practice Sharing Meeting

## NCQA Y2 Cohort

Final Meeting

April 27, 2023, 8:00-9:30am

*Care Transformation Collaborative of RI*

# Agenda

8:00 am	Welcome	Nelly Burdette
8:05 am	<p>Practice Report Outs:</p> <ul style="list-style-type: none"> <li>- NRI Pediatrics</li> <li>- CNEMG Family Care Center</li> <li>- Anchor Medical Lincoln</li> <li>- Anchor Medical Warwick</li> <li>- Anchor Medical Providence</li> <li>- Brown Medicine</li> <li>- Barrington Pediatric Associates</li> <li>- Aquidneck Pediatrics</li> <li>- Hasbro Children’s Hospital Pediatric Primary Care</li> </ul>	All
9:10 am	Overview of Upcoming CTC-RI Projects	Linda Cabral
9:20 am	Wrap up	Liz Cantor and Kristin David



# Housekeeping

- Please...
  - Mute yourself when not speaking
  - If possible, turn your video on, especially when speaking
  - Feel free to put questions in the chat
- *Note: This meeting will be recorded and posted on the CTC-RI IBH webpage:*  
<https://www.ctc-ri.org/integrated-behavioral-health/tele-ibh-and-ncqa-bh-learning-collaborative>

# NRI Pediatrics

- What has been the most valuable change or transformation for your practice as a result of this project?
  - Our PDSA for the project focused on improving visits for ADHD med checks.
    - COVID related issues created a significant need to improve here.
  - Our new workflow to identify patients who need/are overdue for med checks enabled us to follow our patients better and monitor adherence to medication.
  - Over the course of 6 months, through both in-person and telehealth, we significantly improved our visit numbers.

# NRI Pediatrics

- What questions/concerns do you have about sustaining your IBH program moving forward?
  - Our biggest concern is still the need to hire a clinician!!
  - We have the majority of other necessary workflow supports in place.

# Family Care Center, Care New England Medical Group

- **What has been the most valuable change or transformation for your practice as a result of this project?**

*We have improved our ability to implement and track outpatient BH referrals to increase collaborative communication with specialty mental health providers within CNE and outside, thereby assisting patients to access outpatient BH care.*

- ✓ IBH Providers have the same order/referral mechanism available to MDs
- ✓ CNE Referral Hub processes BH referrals similar to medical referrals
- Tracking needs improvement: via Referral Hub / other mechanism...
- ❖ We are actively creating an IBH Community Health Liaison position to work together with the primary care team, which will improve our ability to refer and track.

# Family Care Center, Care New England Medical Group

- What questions/concerns do you have about sustaining your IBH program moving forward?
  - Continued advocacy for IBH within *system of care*
  - Continued support for IBH practice development from *practice* leadership
  - Preventing IBH Provider Burnout
    - Ability to move away from fee-for-service model
    - Funding for IBH Community Health Liaison, Additional IBH Providers
  - Workforce Development, Education
  - Opportunities for ongoing mentorship and community

# Anchor Medical Associates – Lincoln & Warwick

- What has been the most valuable change or transformation for your practice as a result of this project?
  - \* value of the electronic medical record in expanding ability to screen for mental health disorders
  - ie. PHQ 9, GAD 2/7 and AUDIT-C/AUDIT



# Anchor Medical Associates – Lincoln & Warwick

- What questions/concerns do you have about sustaining your IBH program moving forward?

\* Accessibility/Availability

# Anchor Medical Associates Providence

- What has been the most valuable change or transformation for your practice as a result of this project?
  - Deeper understanding of IBH for providers/staff
  - Workflow development (screening, referrals)
  - Plan to apply for IBH distinction

# Anchor Medical Associates Providence

- What questions/concerns do you have about sustaining your IBH program moving forward?
  - IBH staffing
  - IBH specific training opportunities

# Barrington Pediatric Associates

- The most valuable change for our practice as a result of the project is expanding our screenings to include a screener for substance abuse. The CRAFFT screener is a health screening tool designed to identify substance use, substance-related riding/ driving risk and substance use disorder among youth ages 12-21 years of age. We are using the CRAFFT 2.1+N which contains additional questions about tobacco and nicotine use – which has better helped us to assess and develop a plan for vaping and cessation.

# Barrington Pediatric Associates

- My concerns moving forward would be yearly submissions and keeping up with changes and requirements.

# Brown Medicine

*What questions/concerns do you have about sustaining your IBH program moving forward?*

- Post pandemic utilization of behavioral health is at a all time high.
  - Maintaining adequate staffing for patient population.
  - Challenges with limited available referrals options for patients in need of higher level of care.
- Insurance reimbursement challenges and frequent changes require recurrent adjustment.

# Brown Medicine

*What has been the most valuable change or transformation for your practice as a result of this project?*

- Through participating in this program, we have achieved NCQA Behavioral Health distinction for two of our practice locations.
- The distinction has provided a foundation pertaining to documentation and process flows to ensure we created an Integrated Behavioral Health program based on best practices.
- Brown Medicine is currently pursuing NCQA Behavioral Health distinction for our remaining PCMH practice locations.

# Aquidneck Pediatrics

- What has been the most valuable change or transformation for your practice as a result of this project?

The implementation and documentation of evidence-based clinical decision supports has been extremely helpful as it provides a consistent and organized plan of care for our patients.

The establishment of a behavioral health referral tracking process has greatly improved the communication between our office and the treating behavioral health provider's office and has led to more comprehensive and effective care for each patient.



# Aquidneck Pediatrics

- What questions/concerns do you have about sustaining your IBH program moving forward?

Billing and collecting copays for behavioral health services provided within the office, this is something that we have no experience with.

# Hasbro Children's Hospital Primary Care

## What has been the most valuable change or transformation for your practice as a result of this project?

We were delighted to discover that we have provided quality IBH care within our practice, but this project allowed us to more clearly define our work. The NCQA project provided a valuable guide for more clarity in our evaluation and auditing of our behavioral health protocols currently being utilized in the Hasbro pediatric clinic.

- The NCQA criteria helped define expected standards of practice for assessment and referral based on patient screenings such as the PHQ-9 and CRAFFT survey tools.
- It has fostered the development of renewed workflows for tracking referrals with a focus on routine follow-up to ensure patients connect to services.
- The project reinforced the use of evidence-based practices to ensure quality mental health services are offered to families of the pediatric clinic.

# Hasbro Children's Hospital Primary Care

## What questions/concerns do you have about sustaining your IBH program moving forward?

- The evaluation and auditing process guided the development of workflows which are sustainable and accessible for mental health clinicians and providers in the pediatric clinic. The primary concern for sustaining the IBH practice is a matter of training current and future social work, staff and other team members.
- Workflows have been written up which outline assessment, referral and tracking expectations in anticipation of maintaining consistent use of IBH protocols.

# CTC-RI Projects

- **Expanding IBH Capacity in Pediatrics using CHWs**

- Key Staff: Linda Cabral and Liz Cantor
- Timeline: Call for Applications: due May 1<sup>st</sup>, Implementation: May 2023 – April 2024

- **Healthy, Happy Teams**

- Key Staff: Nelly Burdette and Kristin David
- Timeline: Call for Applications: due May 4<sup>th</sup>, Implementation: May – December 2023

- **Incentivizing Community BH Providers to enter into IBH arrangements**

- Key Staff: Nelly Burdette, Kristin David, Liz Cantor
- Timeline: Call for Applications: Summer 2023

Want to stay informed?  
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our newsletter!

# CTC-RI Projects

- **Restrictive Eating Disorders in Children**

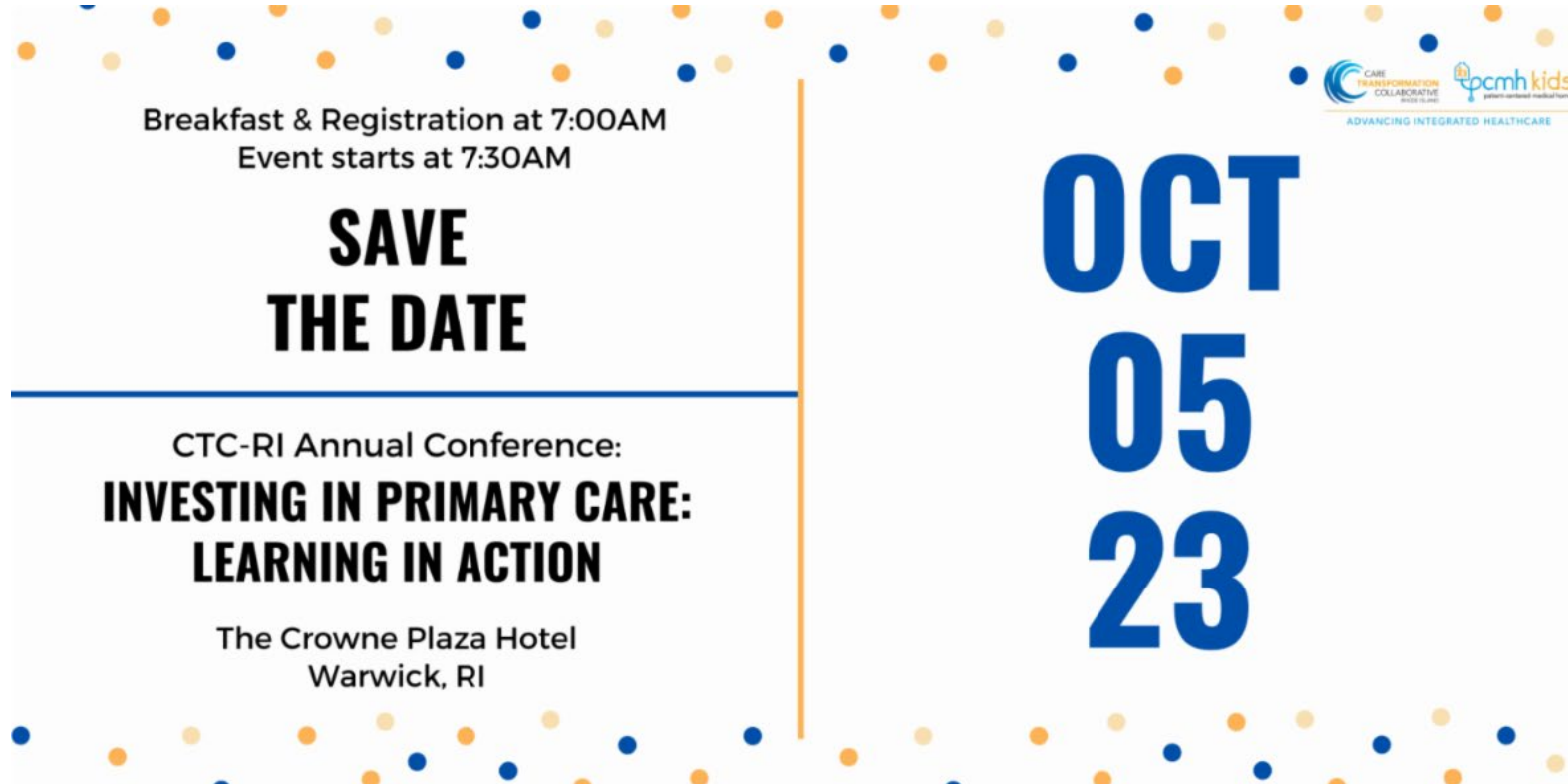
- Key Staff: Christina Tortolani and Liz Cantor
- Timeline: Call for Applications: July 2023, Implementation: September 2023-August 2024

- **IBH Clinician Training – Workforce Development**

- Key Staff: Kristin David and Liz Cantor
- Timeline: Call for Applications: August 2023, Class Start: October 2023

Want to stay informed?  
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our newsletter!

# Save the Date – CTC Annual Conference



Breakfast & Registration at 7:00AM  
Event starts at 7:30AM

**SAVE  
THE DATE**

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CTC-RI Annual Conference:  
**INVESTING IN PRIMARY CARE:  
LEARNING IN ACTION**

The Crowne Plaza Hotel  
Warwick, RI

**OCT  
05  
23**

CARE TRANSFORMATION COLLABORATIVE RHODE ISLAND  
pcmh kids patient-centered medical home  
ADVANCING INTEGRATED HEALTHCARE

# Join us every 3<sup>rd</sup> Friday!



ADVANCING INTEGRATED HEALTHCARE

## IBH Meet and Eat!

*Every 3<sup>rd</sup> Friday, starting September 16<sup>th</sup> at 12:00pm*

Care Transformation Collaborative Rhode Island is offering a casual conversation opportunity with our Integrated Behavioral Health Practice Facilitators! This lunchtime Zoom conversation is to connect our facilitators with IBH clinicians (Psychologists, Therapists, Social Workers, and Nurses)! This is a great opportunity to discuss IBH best practices, challenges, successes, and more. Those who are interested can register through the Zoom link.

To add this to your calendar, email [edwyer@ctc-ri.org](mailto:edwyer@ctc-ri.org) and the link will be sent!

Liz Cantor, PhD, Pediatric IBH Practice Facilitator and Consultant



Dr. Liz Cantor is a licensed child clinical psychologist who has consulted with CTC on a variety of integrated behavioral health projects as a subject matter expert and pediatric IBH practice facilitator. Over the years, Dr. Cantor has developed skills in the areas of program growth and expansion; staff engagement, development, and management; financial management; workflow analysis and implementation; hospital system internal coordination; outcome evaluation; and, helping programs achieve clinical excellence.

Kristin David, PhD, Adult IBH Practice Facilitator and Consultant



Dr. Kristin David designs integrated care models within the practice setting including building the IBH registry, warm handoff work flows, practice team meetings, identifying and engaging with external partners to meet the needs of patients with serious behavioral health conditions. She is an experienced integrated behavioral specialist with a passion for developing systems in which behavioral healthcare is accessible. In addition, Dr. David is an experienced practice facilitator who assist primary care practices with start-up and operational considerations including hiring, scheduling, electronic billing and Implementing screenings for behavioral health conditions (depression, anxiety and substance use disorders) within primary care.

# NCQA BH Distinction Readiness— Status Summary

## Received NCQA BH Distinction

- Brown Medicine

## Continuing to work towards IBH Distinction

*(Looking to hire IBH clinician)*

- Anchor Medical Lincoln
- Anchor Medical Warwick

## Ready to Apply for NCQA BH Distinction Application

- Aquidneck
- CNEMG
- Anchor Medical Providence

- NRI
- Barrington
- Hasbro



# NCQA Y2 Wrap Up

- Incentive payment to be sent **end of May 2023**
- Payment is dependent on meeting project requirements, not application submission

Practices will be eligible to receive up to \$10,000 infrastructure/incentive financial payments during the funding period as outlined below.

1. Infrastructure Payment May 2022 (\$5,000)
2. Infrastructure Payment May 2023 (\$2,500 at completion of learning collaborative, \$2,500 at submission of application or action plan)

- CTC-RI contact for stipend: [edwyer@ctc-ri.org](mailto:edwyer@ctc-ri.org)

# Questions? Contact Us



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