Health and Recovery Plans: An Integrated Case Management Approach

Alan Boardman, LMSW, ACM-SW

Director, Clinical Program Management, BH

January 13, 2020

healthfirst®
Health Insurance for New Yorkers

Agenda

1) Overview of Healthfirst
2) New York State Health and Recovery Plan (HARP)
    a. Background and goals of HARP
    b. Eligibility criteria
    c. Benefit structure
    d. Health Homes
3) Healthfirst's Integrated Case Management Program
    a. Evidence-based foundation
    b. Transactional Integration
    c. Transitions of Care

Overview of Healthfirst

Section Subtitle

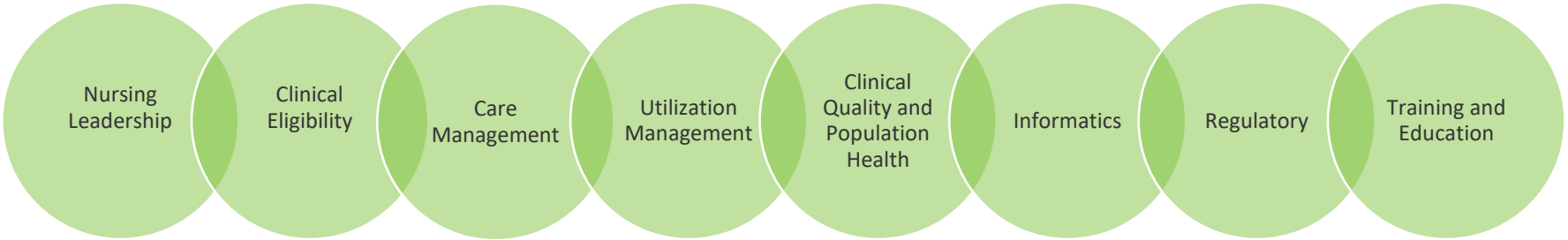
Healthfirst

- A provider-sponsored health insurance company
  - 4th largest health insurance company in NYC ranked by Crain's New York Business
  - Our unique not-for-profit, hospital-sponsored model ensures we provide high-quality care to our members while keeping medical costs reasonable and spending efficient.
  - Funds saved through higher quality and better care management are returned to the provider delivery system.
  - We have 15 major health systems and hospital sponsors, and 80 participating hospitals
- 1.6 million members in New York
  - 1 in 7 NYC residents is a Healthfirst member
  - includes children, adults, seniors, and small businesses across New York City and areas of Westchester and Long Island.

Healthfirst Continued…

- Community partnerships
  - Members have access to more than 23,000 doctors/specialists at 40,000 locations, and to 3,700 pharmacies.
- Healthfirst offers multiple health insurance programs
  - Child Health Plus, Medicaid, Medicare, Managed Long Term Care, Commercial
- Top quality and member satisfaction rankings
  - Five Star Rated Medicaid Plan – 4 years in a row
  - Healthfirst's Medicare Advantage Plan has been named a 4-Star plan 3 years in a row
- Healthfirst Trailblazers
  - Over 4500 employees
  - Hundreds of Nurses and Social Workers work for Healthfirst

Careers at Healthfirst



TRAILBLAZER

healthfirst

healthfirst
Health Insurance for New Yorkers

New York State Health and Recovery Plans (HARP)

healthfirst®
Health Insurance for New Yorkers

HARP Background

- In 2011, New York´s Medicaid program spent nearly $53 billion to serve 5 million people, which was twice the national average. High risk/high need populations, including those who suffer from mental illness and substance use disorders, represented 56% of the spend.
- Despite large expenditures, New York had mediocre health care quality scores compared to national outcomes, and very poor performance in some areas like avoidable hospital use, where New York ranked 50th in the country.
- Gov. Cuomo determined that New York´s Medicaid program would not be sustainable unless underlying issues were addressed and spending growth contained.
- Governor Cuomo created the New York Medicaid Redesign Team (MRT), and a new Medicaid 1115 waiver replaced the state´s Medicaid fee-for-service system with a comprehensive, high-quality and integrated care management system to lower costs and improve outcomes.
-

NYS Health and Recovery Plan (HARP)

- A type of Medicaid Managed Care Plan that manages physical health, mental health, and substance use services in an integrated way for adults
- Designed for people with serious mental health conditions and substance use disorders
- Covers all benefits provided by Medicaid Managed Care Plans, including specialty services to help people live better lives, and to become part of the community
- Care management for all is a key component to be delivered in a coordinated fashion by Health Homes, providers and health plans. Health plans and their network partners manage the complete health, long term care, behavioral health and social determinants of health needs.
- HARPs must be qualified by NYS after a rigorous readiness review. Plans must have specialized expertise, tools and protocols that are not typically part of most medical plans.

HARP Goals

HARP Goals:

- Improve health and BH outcomes for adults enrolled in Mainstream Medicaid Managed Care (MMC) plans, whose BH care was previously covered under a fee-for-service (FFS) payment arrangement.
- Improve health, BH, and social functioning outcomes for adults enrolled in the HARP program.
- Develop BH home and community-based services (HCBS) focused on recovery, social functioning, and community integration for HARP enrollees meeting eligibility criteria for such services.

HARP Eligibility

- People must be 21 or older to join a HARP, be insured only by Medicaid, and be eligible for Medicaid managed care.
- New York State (NYS) will identify people that are eligible for HARP based on several factors, including past Medicaid use.
- Exclusions:
  - Have both Medicaid and Medicare
  - Live in a nursing home
  - Are in a Managed Long Term Care Plan
  - Are under age 21
  - Have services from the Office for People with Developmental Disabilities (OPWDD)

Emphasis on Recovery

Defining Recovery

"Recovery is a journey of healing and transformation enabling a person with a mental health or substance use problem to live a meaningful life in a community of his or her choice while striving to reach his or her full potential." (The Council on Quality and Leadership, 2010)

Home and Community Based Services

- The Centers for Medicare and Medicaid Services (CMS) authorized various BH HCBS under Medicaid waiver authority
- BH HCBS are designed to help adults (21 and over) with serious mental illness and/or Substance Use Disorder remain and recover in the community and reduce preventable admissions to hospitals, nursing homes, or other institutions.
- BH HCBS address isolation and promote integration by providing a means by which individuals may gain the motivation, functional skills, and personal improvement to be fully integrated into the community and achieve life goals.
- The recovery model of care, as envisioned in the HARP and HIV SNP models, emphasizes and supports an individual's recovery by optimizing quality of life and reducing symptoms of mental illness and Substance Use Disorders through empowerment, choice, treatment, education, employment, housing, and health and well-being.

HCBS Services

- Psychosocial Rehabilitation
- Community Psychiatric Support and Treatment
- Habilitation
- Family Support and Training
- Short-Term Crisis Respite
- Intensive Crisis Respite
- Education Support Services
- Peer Services
- Employment Services

Health Homes

- A Care Coordinator develops an integrated care plan with the individual and their providers.
- The intent is that all health records are shared electronically among providers so that services are not duplicated or neglected.
- Health Home services are provided through a network of organizations/providers.
- The Health Home will be accountable for reducing avoidable health care costs, specifically:
  - Preventable hospital admissions/readmissions
  - Emergency Room visits
  - Ensuring members have a Primary Care Physician, Psychiatrist/ Therapist

Healthfirst Integrated Case Management Program

Healthfirst Team Collaborative Model

BACKGROUND:

The “HARP” model of care was designed to focus on members wellness by viewing member as a whole person. A member’s wellness being dependent on health of mind, body and beliefs around their view of wellness.

The Healthfirst Integrated Model of Care brings Health Home Care Managers and Healthfirst Care Managers together as a team to manage each individual’s health, wellness and recovery.

healthfirst
Health Insurance for New Yorkers

Healthfirst HARP Model of Care

- Each member is assigned to:
  - ✓ a Health Home
  - ✓ a Healthfirst HARP Care Team

  Each member has a member centric *integrated* plan of care

- Healthfirst and Health Home Care Managers share relevant information to make sure the member is receiving coordinated, targeted, specialized care.

- An integrated approach to the member has allowed us the opportunity for our members to receive more coordinated care with Medical health, pharmacy, behavioral health, and health home working together to develop and implement a comprehensive integrated care plan

ENGAGEMENT

- High risk cases come to the Care Management team via several channels
  - Internal referrals from other departments at HF
  - External referrals
  - Self-referrals
  - Data mining: claims
  - H9 report
- Help the member identify their goals and prioritize their immediate needs
- Create a member-centric plan together

HARP Care Management

The Healthfirst Care Team:

- General Medical and Behavioral Health Care Managers on one team under single leadership
- JinHee Yoon Hudman, MD – Medical Director and overall HARP manager
- Laurie Lichorat, RN – Director, HARP Clinical Management reporting to Dr. Yoon
- Have overall accountability for approving and managing the utilization within the clinical plan of care
- Communicate key information to the Health Home Care Manager:
  - Admissions and discharges
  - Pharmacy information
  - Gaps in care
  - Updated member contact information

healthfirst®
Health Insurance for New Yorkers

Transactional Model

- General Medical and Behavioral Health Care Managers teamed and then work with a specific Health Home
  - Provides continuity for Health Home and down stream provider staff
- Impact of transactional Integration
  - When HF Care Manager meeting with member or HH staff they are expected to manage all needs in the transaction
  - Do not limit interaction to behavioral health or general medical
  - Staff training has been ongoing to get CMs comfortable in initial planning for all issues raised by member
  - Through HF care management system our CM sees all issues and can intercede as needed
- Continuing process of evaluation as initially staff was challenged to get out of their comfort zone and look at whole person – now this is growing with merging of the PH and BH teams into a single group

Staff Training

The Joe Parks Education Series was used to train staff. Topics covered included:

- Chronic Diseases
- Preventative screening for chronic conditions
- Diabetes
- Hypertension
- Asthma and COPD
- Dyslipidemia
- Hepatitis C
- Medication non-adherence
- Addressing obesity-adult and youth
- Tobacco Use

Other training topics include:

- Motivational Interviewing
- Wellness coaching
- Eight Dimensions of Wellness

Conclusion

The HARP members have significant medical conditions as well as behavioral health conditions that are not isolated. It is a balance of mind and body that create wellness.

Behavioral Health and Medical Health case managers will continue our integrated approach and work closely to manage the population together as an internal team as well as strengthening the work with our health home and care management agency providers.

While this concept of care was unchartered territory for this team when it was implemented, it is now a well traveled path that is leading to results.

healthfirst®
Health Insurance for New Yorkers