

# CCO Transformation Plan Element #1: Physical, Mental Health and Addiction Integration

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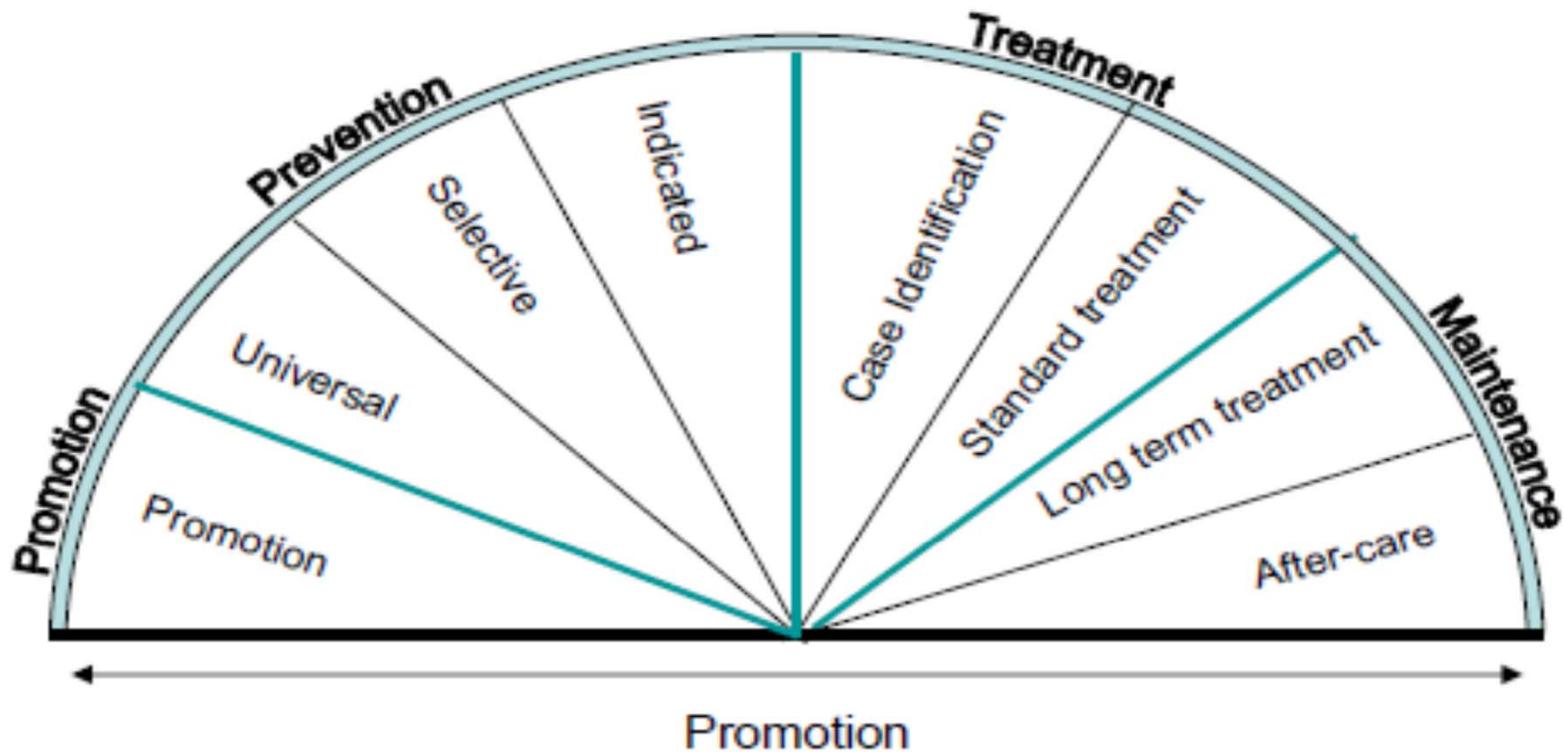


# Webinar Organization

- Presentation follows outline from supplemental guidance on Element #1 for CCO Transformation Plans
- Guidance not intended to be prescriptive but provides ideas/examples.
- Components Include:
  - Prevention, Promotion, Early Identification and Early Intervention
  - Shared Health Information
  - Training and Cross Training
  - Individuals with Serious and Persistent Mental Illness
  - System of Care
  - Transitions of Care
  - Recovery Management

# Institute Of Medicine (IOM)

## Spectrum of Intervention



Source: Adapted from IOM, *Reducing Risks for Mental Disorders, Frontiers for Preventive Intervention Research*, 1994.

# Prevention, Promotion, Early Identification and Early Intervention

- Describe how the CCO will progress to include the prevention, promotion, early identification, and early intervention of conditions that lead to chronic mental health and addictions. These disorders often lead to chronic physical conditions as well.
- Examples:
  - Partnering with Local Public Health and Community Substance Abuse Prevention to integrate behavioral health profiles into Community Health Assessment.
  - SBIRT (Screening, Brief Intervention and Referral to Addiction Treatment)
  - Screening for clinical depression
  - EASA (Early Assessment Support Alliance)

# Shared Health Information

- Describe how the CCO will direct and support provider to readily share health information to coordinate care. Includes communication of physical health, mental health and addictions health information across a network of providers especially during care transitions.
- Resources:
  - OHA Tip Sheet
  - SAMHSA Fact Sheet on 42 CFR Part 2:  
[http://www.samhsa.gov/about/laws/SAMHSA\\_42CFRPART2FAQII\\_Revised.pdf](http://www.samhsa.gov/about/laws/SAMHSA_42CFRPART2FAQII_Revised.pdf)

# Training and Cross Training

- Cross training of behavioral health and physical health providers.
  - Physical health providers receive specific training on behavioral health
  - Behavioral health providers receive specific training on physical health
- Multidisciplinary meetings to identify barriers and develop solutions to further integration.

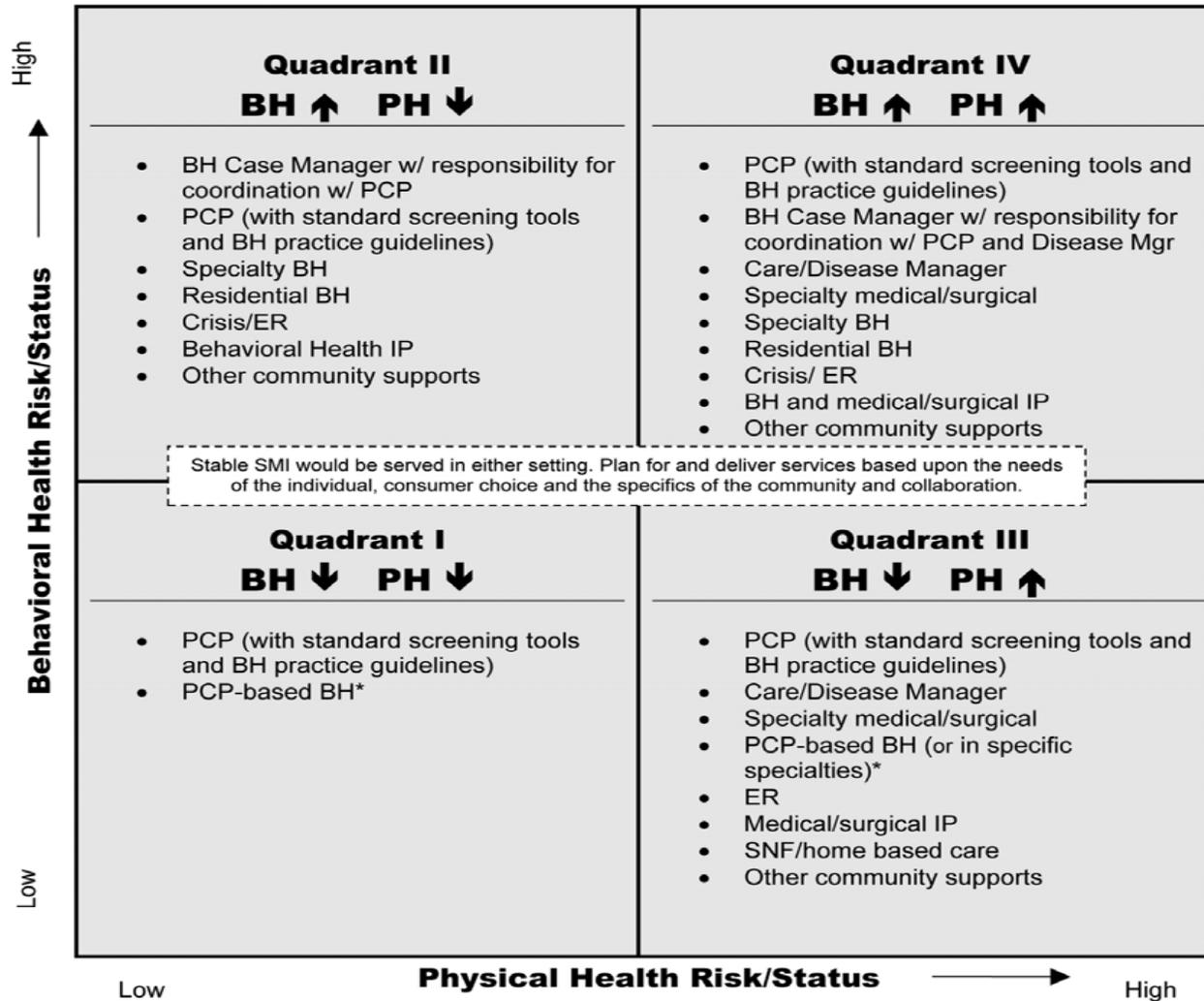
# Individuals with Serious and Persistent Mental Illness

- Describe plans to provide physical health care for persons with SPMI and chronic health conditions (examples: cardiovascular disease, diabetes)
- Plans to incorporate physical health care outreach into the community for this population.
- Physical health care for individuals residing in licensed residential facilities (may be outside of CCO area).
- Plans to enroll individuals in this population into Person Centered Primary Care Homes.

# System of Care

- Incorporating models such as the Four Quadrant Clinical Integration Model of the National Council for Community Behavioral Healthcare and/or Wraparound for children with behavioral health disorders.
- Define mechanisms and capacity to meet access standards consistent with current standards of practice: emergency, urgent, regular, and post facility-based treatment.
- Adequacy of network accessible by members in various stages of behavioral health illness/recovery.

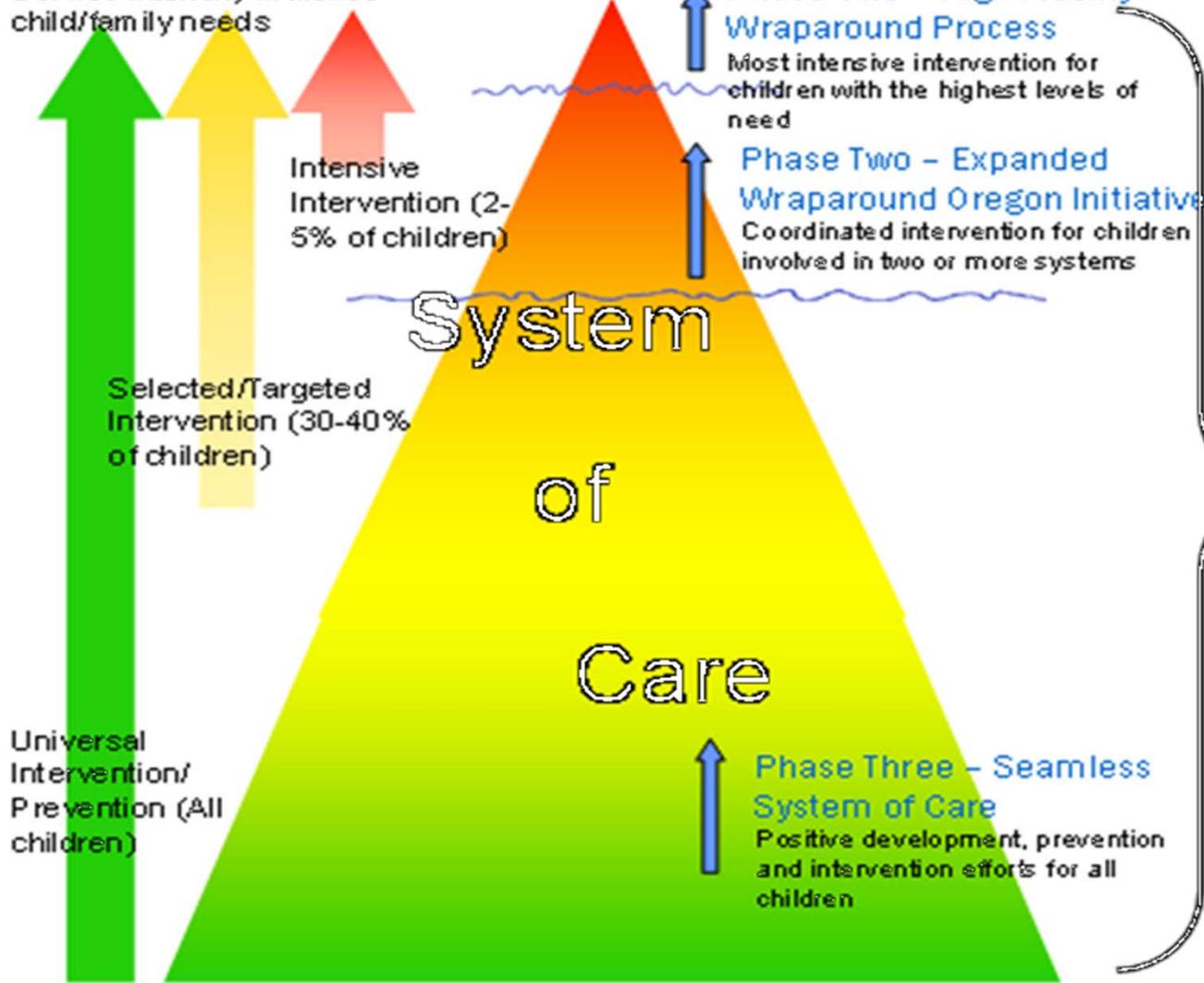
## The Four Quadrant Clinical Integration Model



\*PCP-based BH provider might work for the PCP organization, a specialty BH provider, or as an individual practitioner, is competent in both MH and SA assessment and treatment

**Public health approach:**

Service intensity matches child/family needs

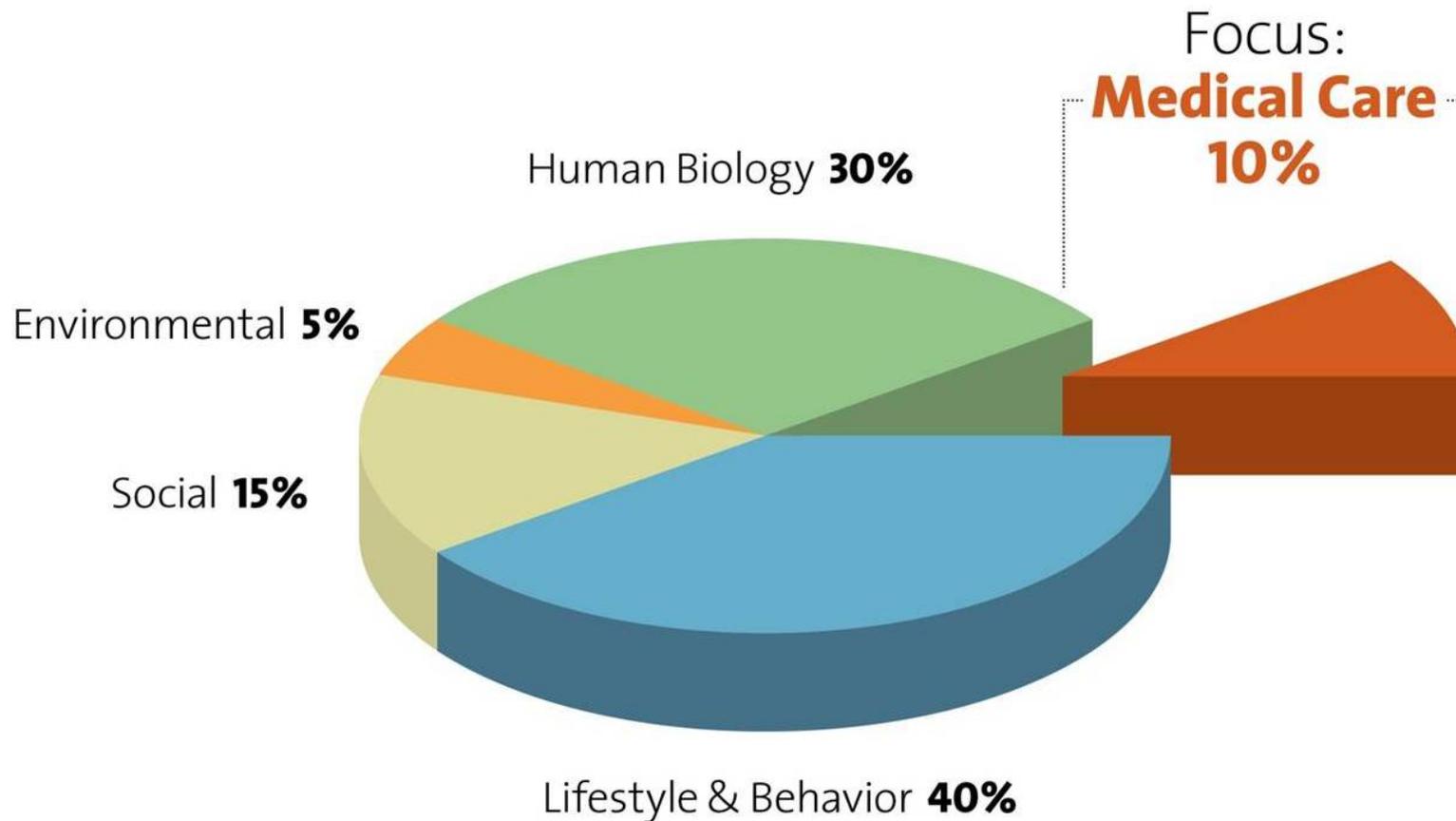


- System of care philosophy:**  
consistent values guide activities and decisions at the system level AND at the service level:
- Cultural Competence
  - Family & Youth Voice
  - Strengths Based
  - "Seamless"
  - Collaborative, Coordinated
  - Unconditional Care
  - Prevention/Early Intervention
  - Effective Services
  - Natural Supports

The Oregon Statewide Wraparound Initiative combines a *public health approach* with a *system of care philosophy* in order to meet the needs of children involved in two or more systems, and their families.

# Transitions of Care

- People with behavioral health disorders are particularly vulnerable for relapse, losing supportive connections, and escalation in symptoms leading to poor clinical outcomes during times of transitions in care.
- Describe plans to facilitate effective coordination of care for individuals transitioning levels of care such as:
  - Detoxification
  - Hospitalization for mental illness
  - Residential care (mental health and addictions)
  - Secure Children's Inpatient Program and Secure Adolescent Inpatient Program



## Today's Oregon Health Plan

We haven't been doing anything to solve the problem of rising costs because we were dealing with 10% of the pie.

# Recovery Management

- This includes how the CCO will help members connect with social supports such as housing, vocational, educational, cultural, basic needs and other services that support ongoing recovery for people with behavioral health conditions.
- Includes how the CCO will help members connect with peer-delivered services (family navigators, recovery mentors, and other non-traditional health workers) to promote motivation for recovery and sustain recovery connections in the community over time.

# Coordination with Community Mental Health Program

- CCOs are required to have a written agreement with the Local Mental Health Authority.
- Describe processes to operationalize the agreement
- Describe how the agreement will be monitored

# Technical Assistance Resources

**CCO website:** <https://cco.health.oregon.gov>

Guidance materials, including links to best practices and FAQs

**Email address:** [Ccotp.help@state.or.us](mailto:Ccotp.help@state.or.us)

Questions about Transformation Plan development

## **OHA points of contact**

Cascade, Columbia Pacific, EOCCO, Pacific Source:

Tracey Robichaud

FamilyCare, HSO:

Keri Mintun

WOAH, Primary Health of Josephine County,

Jackson CareConnect:

Lisa Welch

Yamhill, IHN, Trillium, WVCH:

Rosanne Harksen

AllCare, Umpqua:

Bevin Hansell

# Links and Resources

- EASA-
  - OHA State Contact: 503-947-5538
  - EASA Statewide Website: <http://www.easacommunity.org>
- SBIRT –
  - OHA State Contact: 503-569-7421
  - OHSU SBIRT Primary Care Residency Initiative [www.sbirtoregon.org](http://www.sbirtoregon.org)
- Wraparound
  - <http://www.oregon.gov/oha/amh/pages/wraparound/main.aspx>
- Recovery Oriented System of Care (addictions)
  - <http://partnersforrecovery.samhsa.gov/rosc.html>
- E-mail questions to: [ccotp.help@state.or.us](mailto:ccotp.help@state.or.us) or contact the assigned TA lead.

# QUESTIONS & ANSWERS