Behavioral HealthChoices An Integrated Human Services Model

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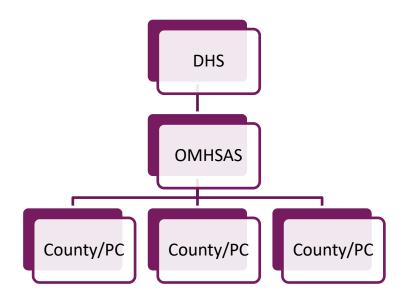


Behavioral HealthChoices

- HealthChoices is PA's mandatory managed care program for Medical Assistance recipients
- Goals:
 - 1) Improve access to health care services
 - 2) Improve quality of care available
 - 3) Stabilize Medical Assistance spending
- Three components: physical health, long term supportive services and behavioral health



Behavioral HealthChoices: An Integrated Human Services Model



 Oversight by the Office of Mental Health and Substance Abuse Services (OMHSAS) in the Department of Human Services (DHS)

- Behavioral HealthChoices leverages the historic county role in administering mental health, substance use and human services
- Counties hold the "right of first opportunity" to administer funding for their Medicaid beneficiaries
 - Rationale: integration of funding for behavioral health at the county level allows for local coordination of vital health and human services

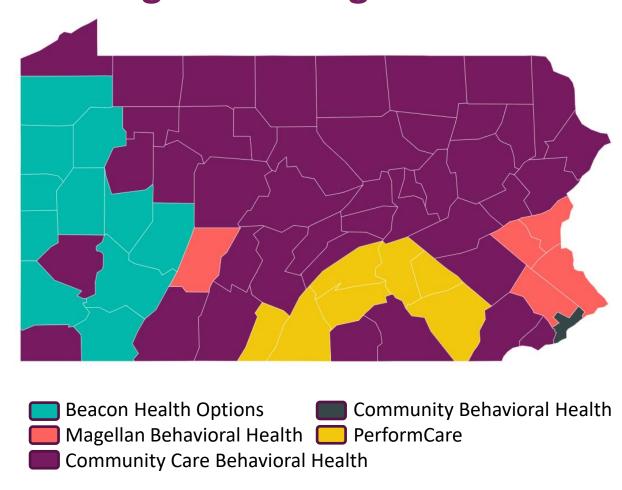


Behavioral HealthChoices Contracting and Administration

- Commonwealth issues contracts to the counties (or their administrative entities) who serve as primary contractors (PCs) for BH HealthChoices
 - These contracts are "at-risk": counties/PCs are responsible for funding all medically necessary BH services under capitated rates
- Capitated rates are actuarially established annually by DHS/Mercer based on past year's claims and projected service utilization
- Counties/PCs may hold the risk, share it or download it to a behavioral health managed care organization (BH-MCO)



Counties/Primary Contractors Partner with Behavioral Health Managed Care Organizations



- All 67 counties participate in Behavioral HealthChoices
- Counties/Primary Contractors select Behavioral Health Managed Care Organizations (BH-MCOs)
- There are currently 5 BH-MCOs serving
 4.5M HealthChoices members
 - Beacon Health Options
 - Community Behavioral Health
 - Community Care Behavioral Health
 - Magellan Behavioral Health
 - PerformCare



Investing and Reinvesting in Communities

- Counties do not retain funds from medical savings
- Instead, up to 3% surplus can be used for state-approved reinvestment plans
- Reinvestment plans enhance local BH services and can address social determinants of health like housing and food insecurity





Example: Multiple Partnerships to Enhance Housing Status

- Evidence-based
 - Permanent Supportive Housing
 - Housing First Model
- Housing Support Agency provides housing specialists while HealthChoices provides community supports and engagement with BH and PH providers





Effective Use of Value-Based Purchasing Strategies



Implementation of Health Homes for individuals with serious mental illness (SMI), children, and members with substance use disorder (SUD)



Increasing the rate of competitive employment



Decreasing readmission rates



Increasing post-hospital engagement



Behavioral HealthChoices Has Been a "Triple Aim" Success







Per capita spending -0.7% vs. +3.1% health CPI



Access

2x people receiving care



Mental Health America consistently rates Pennsylvania among the top three states overall for access to care, quality, and mental illness prevalence



Health Integration with Medicaid Physical Health Plans and Providers

- Focus is on enhancing integration in provider settings
- Behavioral Health Home Plus
- Collaborative Care
- Co-located Services
- Integrated Care Plans between BH and PH managed care plans





Strong Focus on BH in Community HealthChoices

- Daily collaboration between plans
- New Program Development
 - Community Stabilization Teams of BH specialists
 - BH Care Management for CHC members
- Training and Education of our staff and providers
- Close engagement with other stakeholders (e.g. nursing facilities and Area Agencies on Aging)



Multiple Partnerships with Educational Settings

- Community and School Based teams of behavior specialists are integrated with educational services
 - 69 teams in 50 school districts
- Widespread placement of mental health professionals in schools for outpatient treatment





Addressing the Opioid Crisis

2009 to 2015

Develop and implement best practice guidelines

Data sharing with providers

Support Centers of Excellence

2016 to 2022

340% increase in medication prescribing access

Expansion of COEs (17,000 members), & Expansion of telehealth to address pandemic

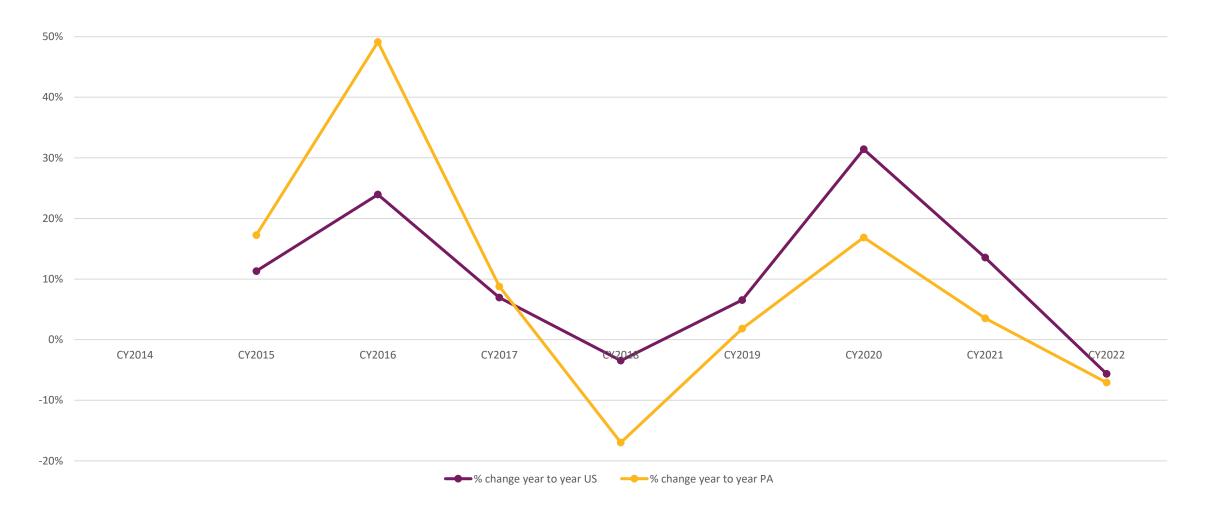
2023 - 2025

Expand medication use to all forms of treatment

Support medication use and psychosocial care through value based payments

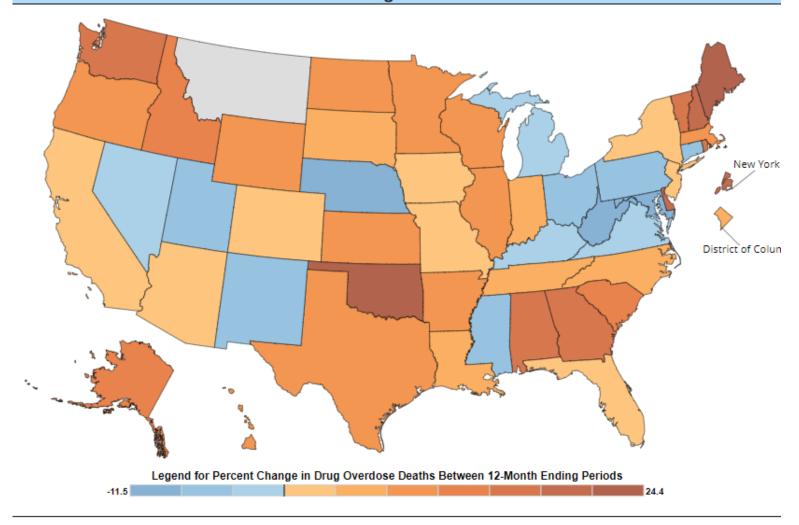


Opioid Death Rate Trend in PA Better than National Reports





1b. Percent Change in Predicted 12 Month-ending Count of Drug Overdose Deaths, by Jurisdiction: Auguto August 2022





Successful Integration of Behavioral HealthChoices & County Services

Supporting Individuals Transitioning from Forensic Settings

- County funding brings Certified Recovery Specialists (CRS) from outpatient treatment programs into the county
 jail to educate inmates on the treatment of opioid use disorder
- Upon release, many individuals are Medicaid eligible and services can be funded with HealthChoices funding.

Coordination of Medicaid with other County funding streams

- Many Medicaid eligible individuals are involved with multiple county human services and criminal justice departments
- Counties coordinate across departments and facilitate coordination of services
- Services and departments involved in many counties include:

• Adult probation offices Housing support services

Child welfare agencies
 Courts and jails

County jails
 County aging agencies



Moving Forward Together

- PA's HealthChoices program is a national leader in:
 - Health and human services integration
 - Physical and behavioral health integration
 - Creative use of BH reinvestment funds to address social determinants
 - Effective management of costs for individuals with serious mental illness

 We are poised for new achievements that effectively use Medicaid funding for enhanced wellness and wellbeing for PA residents

