

Behavioral Health Community Care Partners



COMMUNITY + LTSS
CARE PARTNERS

What is a Community Partner?

- Community Partners are community based organizations contracted by MassHealth to provide enhanced care coordination for members enrolled in ACOs and MCO's with complex needs
- There are two types:
 - **Behavioral Health Community Partners (BH CPs)**-responsible for care management and coordination for populations with significant behavioral health needs
 - **Long Term Services and Supports Community Partners (LTSS CPs)**-provide LTSS care coordination and navigation to populations with complex LTSS needs

• Information taken directly from the MassHealth Payment and Care Delivery Innovation, Provider Education and Communication presentation

Community Care Partners

Community Care Partners is a collaboration of three community-based providers that offer care coordination services to Masshealth enrollees with complex behavioral, medical and substance related needs.

The member organizations are:

Vinfen

Baycove

Bridgewell

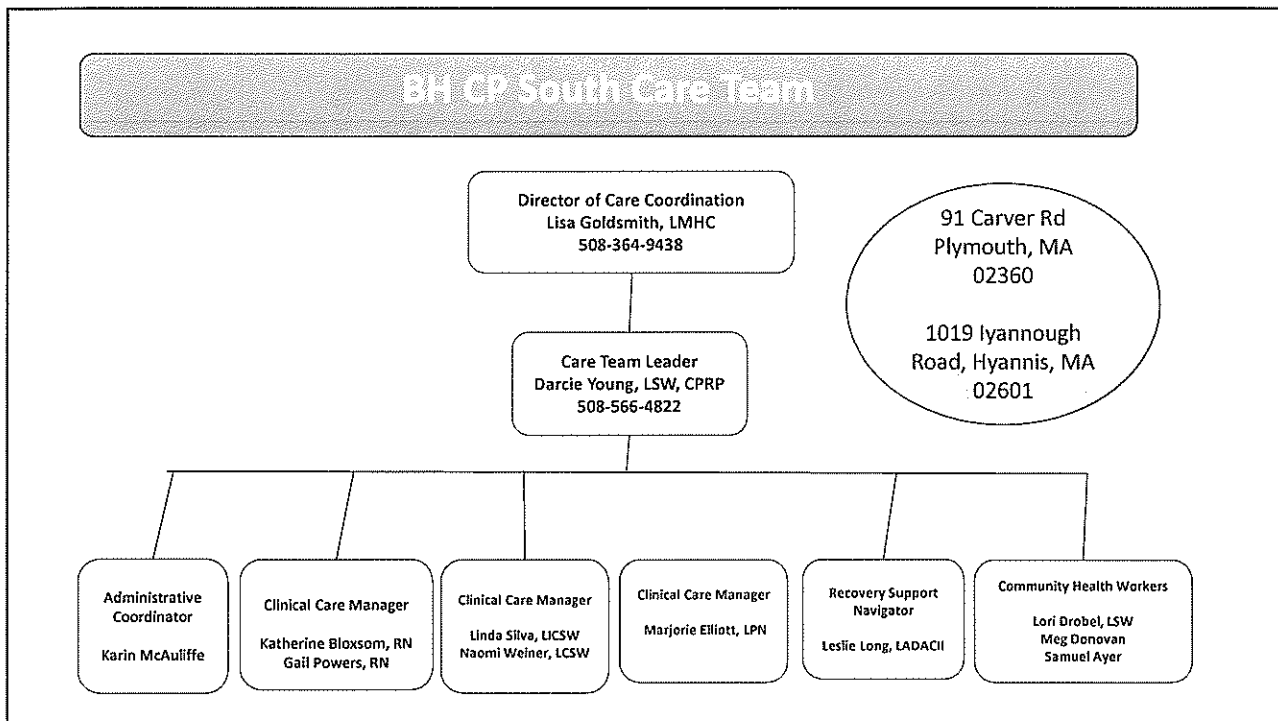
What is Care Coordination?

Care coordination :

a mechanism through which teams of health care professionals work together to ensure that client health needs are being met and that **the right care** is being delivered in **the right place**, at the **right time**, and by **the right person**.

Goals or Desired outcomes of Care Coordination:

- improve overall health and quality of life
- help clients become more empowered and confident health care consumers
- improve experience of care (including quality, access, and reliability)
- Reduce duplicative services
- Reduce cost



Care Team Leader

- The Team Leader provides clinical and programmatic oversight to the Behavioral Health Care team in provision of intensive care coordination and clinical care management for MassHealth members with complex medical and behavioral needs who are enrolled in an ACO or MCO plan, or ACCS services.
- Collaborates with the Director in developing and managing ongoing working relationships with the enrollees ACO/MCO/ACCS team to minimize duplicative efforts, promote integrated care, ensure quality and continuity of care and support the values of person-centered planning, Community First and SAMHSA Recovery principles.

Clinical Care Manager-RN/LPN

- The Clinical Care Manager-RN is at the helm of organizing and coordinating resources and services in response to the Enrollee's healthcare needs across multiple settings, and inclusive of both LTTS and Social Determinants of Health needs.
- Conducts medication reviews and reconciliation after care transitions
- Reviews and signs off on the medical components of the comp assessment of care team enrollees
- Monitors the Enrollee's health status and needs and provides nursing and medical care coordination

Clinical Care Manager-LPHA

- The Clinical Care Manage LPHA (LICSW,LMHC,LCSW) is responsible for conducting initial and ongoing risk assessment; designing personal crisis management plans, relapse prevention and harm reduction strategies with Enrollees who have been identified as having complex behavioral health needs.
- Manages psychiatric care transitions through collaboration with Enrollee, community provider staff, ICT and hospital staff to ensure a safe discharge plan and a well-coordinated implementation of the that plan.

Recovery Support Navigator

- The Recovery Support Navigator specializes in supporting Enrollees with substance use disorders (SUD) and serves as the team's resource on SUD assessment, treatment and rehabilitation techniques and resources.
- The role supports the TL in maintaining the team's adherence to fidelity standards of co-occurring disorder evidence-based practices.

Community Health Worker

- The Community Health Worker role drives outreach and engagement, assessment and care planning, care transitions, health and wellness coaching, as well as community and social services connections in partnership with the Enrollees and their care teams.
- Coordinate the development and implementation, and ongoing review of the Enrollee's Person-Centered Treatment plan
- Assist with addressing social determinants of health

Administrative Coordinator

- The Administrative Coordinator (AC) manages administrative activities and creates and maintains operational systems to support the Community Partner teams in meeting contractual obligations.
- The AC partners with the TL to ensure that all quality performance metrics are being met and that Enrollees are satisfied with services
- Supports collaboration with ACO/MCO plan staff and community based medical, specialty, behavioral health, and social services providers.
- Manage information flow and work flows of team operations
- Manage and monitor the process of securing authorization for services

BH CP Care Team Functions [BH + Medical + LTSS + Social Services]

1. Outreach and Engagement
2. Assessment + Care Planning
3. Care Coordination / Care Management
4. Care Transitions
5. Medication Reconciliation
6. Health + Wellness Coaching
7. Connection to Community /Social Services

Eligibility Requirements and Referral Process

- ACO and MCO enrolled members age 21-64 with serious mental illness and/or substance use disorder treatment needs with high service utilization
- In addition, MassHealth member who are in DMH’s ACCS program are eligible for BHCP supports, unless they are enrolled in One Care or SCO.
- MassHealth is assigning identified members for the first two quarters using claims and service-based analysis
- Provider/self/family referral-see attached form

Eligibility Grid

Insurance type	Eligible for BHCP (person is ACCS/Post CBFS only)	Eligible for BHCP (person is not in ACCS/post CBFS)
MassHealth Standard - enrolled in an ACO or MCO	yes	yes
MassHealth Standard - not enrolled in an ACO or MCO	yes	no
MassHealth Standard + Medicare (not enrolled in One Care or SCO)	yes	no
MassHealth STANDARD PLUS DDS ADULT SUPPORTS WAIVER	yes	yes (if in ACO/MCO)
MassHealth STANDARD PLUS DDS INTENSIVE SUPPORT WAIVER	yes	yes (if in ACO/MCO)
MassHealth STANDARD PLUS FRAIL ELDER HCBS WAIVER	yes	yes (if in ACO/MCO)
MassHealth Standard plus MFP community living HCBS waiver	yes	yes (if in ACO/MCO)
MassHealth CommonHealth	yes	yes
MassHealth Standard + private insurance	yes	no
MassHealth CommonHealth + private insurance	yes	no
Mass Health Limited (may also have Health Safety Net or Partial)	no	no
MassHealth Premium Assistance	no	no
Health Safety Net or Partial Health Safety Net	no	no
Care Plus	yes	yes
Connector Care	no	no
Connector + HSN or Partial HSN	no	no
Medicare A+B only	no	no



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