The Colorado Story

Directed by Randall Reitz

Featuring Larry Mauksch Helen Royal Polly Kurtz **Ben Miller** Michael Olson **Alex Hulst Barbara** Martin **Michael Talamantes** Discussants Susan McDaniel Frank deGruy















Mental Illness, Functional Impairment, and Patient Preferences for Collaborative Care in an Uninsured Primary Care Population. *Journal of Family Practice*. 2001 **Collaborative Family Health Care in an Uninsured Primary Care Population: Stages of Integration.** *Families, Systems, and Health.* 2002

The Content of a Low Income Primary Care Population: Including the patient Agenda. Journal of the American Board of Family Practice. 2003

Improving Quality of Care in an Uninsured, Low Income Primary Care Population. *General Hospital Psychiatry. 2007*











Community Care Clinic

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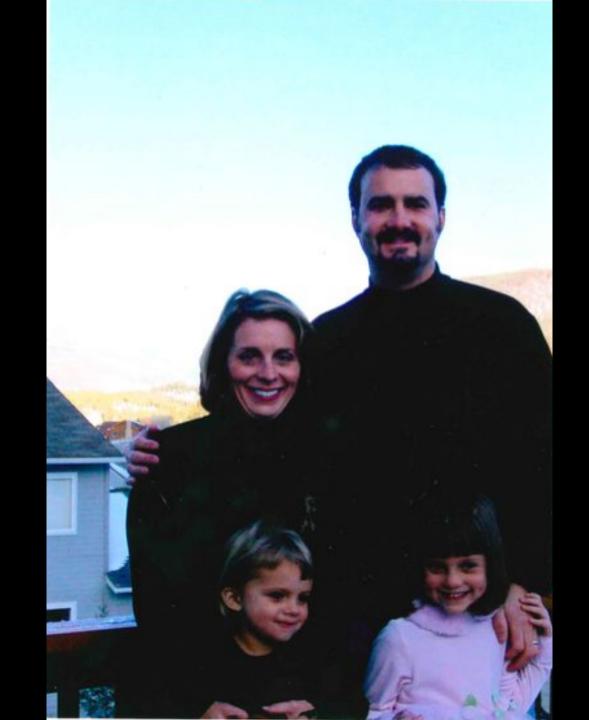














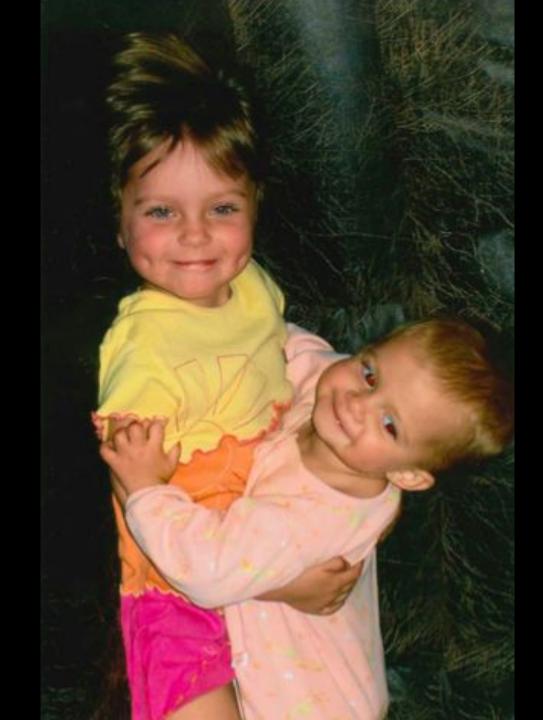


























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Representing Lori Stephenson Director of Practice Transformation













WHY INTERESTED?



- Rural, western CO focus
- Partner with payer
- Develop curriculum for IBH
- Strengthen IBH care teams



- Rural, western CO focus
- Strengthen IBH care teams
- Cost savings
- Healthier members
- ✓ Limited expertise in IBH
- Prep for value-based payments
- Prep for statewide SIM program

AREAS OF EXPERTISE



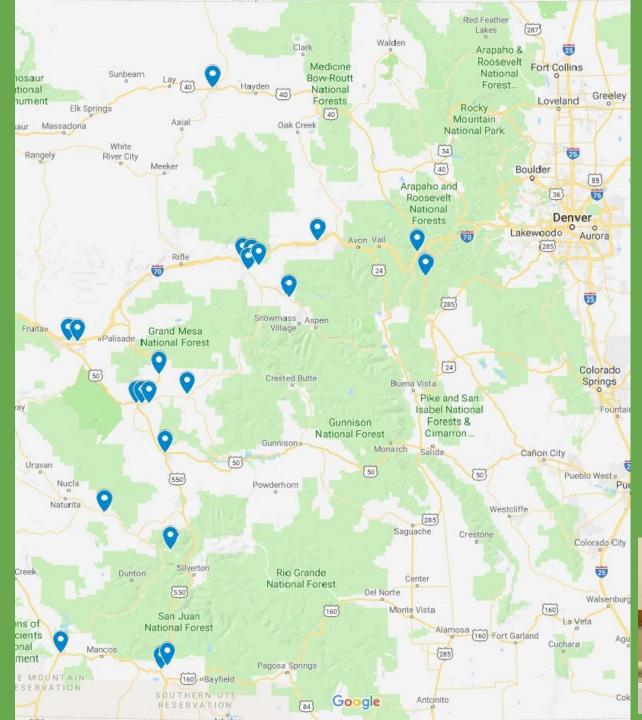
- IBH competencies & training
- Residency resources
- Curriculum & evaluation
- Residency alumni connections



- Quality improvement and data expertise
- Relationships with PCP offices
- Align with other QI programs

FOUR YEARS LATER (2018)







Durango



Glenwood Springs

Cortez & Mancos



UNIQUE PRACTICES

RESIDENTS STAYING IN WESTERN CO (2014-2018)

LEARNING COLLABORATIVES





OPERATION: TEXAS RECOVERY PROJECT

KEY TAKE AWAYS

- Multifaceted team with strong relationships
- Onsite practice coaching for creative solutions
- Alignment with payment opportunities

COLORADO STATE INNOVATION MODEL

BARBARA MARTIN, RN, MSN, ACNP-BC, MPH MICHAEL TALAMANTES, LCSW

WHAT IS COLORADO SIM?



- SIM: State Innovation Model
- SIM is an initiative of the Center for Medicare & Medicaid Innovation (CMMI).
- Colorado was awarded a \$2 million planning grant and \$65 million implementation grant to strengthen Colorado's Triple AIM strategy.
- Encourages states to develop and test models for transforming healthcare payment and delivery systems.

SIM APPROACH



80% of Coloradans have Access to Integrated Care

Payment Reform

Develop and implement valuebased payment models that incent integration and improve quality of care

Practice Transformation

Support practices as they integrate behavioral and physical health care and accept new payment models

Population Health

Engage communities in prevention and education, and improve access to integrated care

Workforce

HIT

Promote secure and efficient use of technology across health and nonhealth sectors to advance integration and improve health

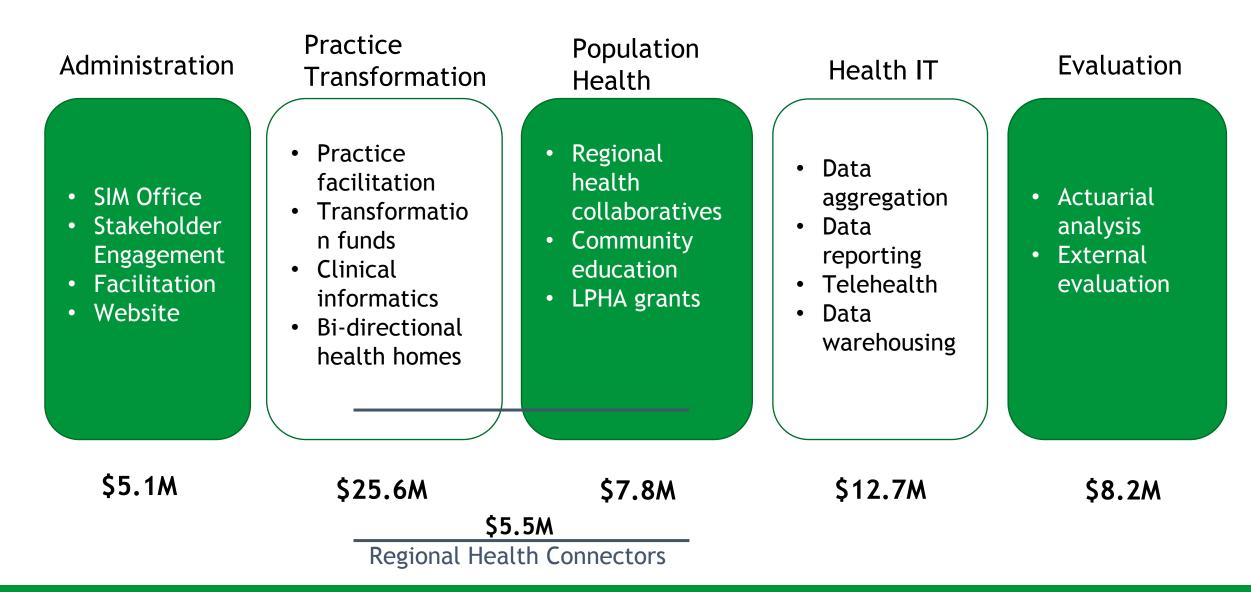
Consumer Engagement

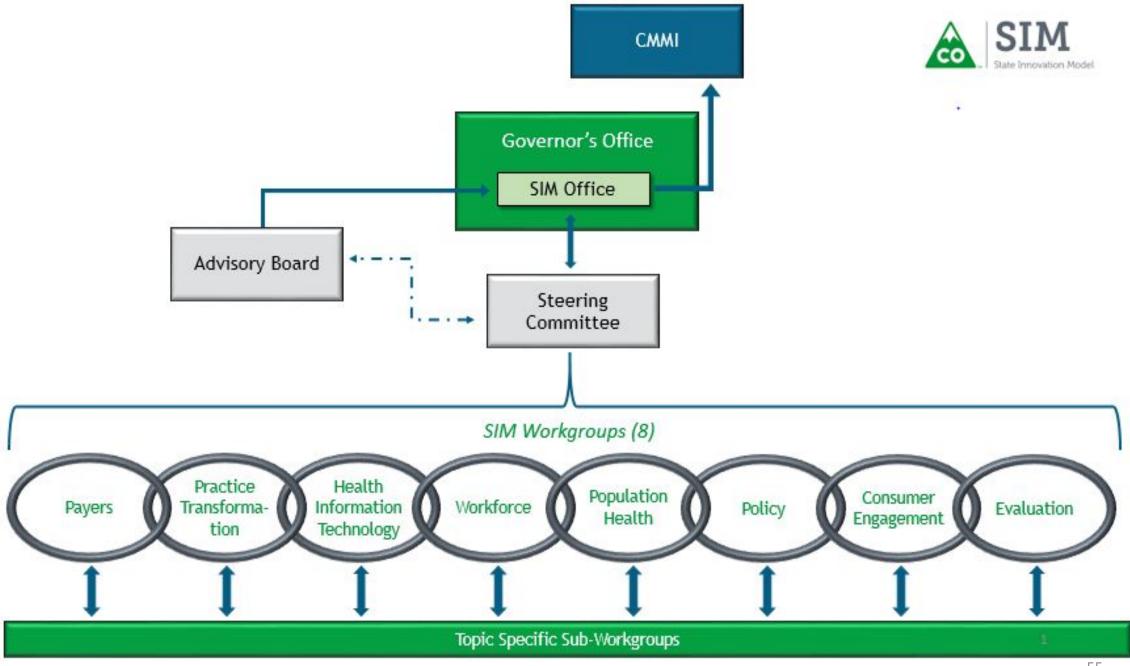
Policy

Evaluation

BUDGET OVERVIEW







WORKFORCE WORKGROUP

- 20 engaged stakeholders from across the state
- Workgroup charter:
- The Workforce Workgroup will assess and plan for the development and standardization of the workforce needed to effectively deliver integrated care. Specific objective are to:
- Make recommendations regarding minimum qualifications, credentialing, training, and job descriptions for new positions within the workforce,
- Offer guidance on the best manner of delivering training to existing providers in order to promote successful integration of behavioral and physical health, and

WORKFORCE WORKGROUP



ELEMENTS OF INNOVATION



Practice Participation Payments Each practice participating in SIM is eligible to receive \$5,000 in participation payments, over a twoyear period, for attending collaborative learning session, participation in evaluation, and reporting on clinical quality measures.

Regional Health Connectors Each SIM practice will be matched with a Regional Health Connector, who will serve as a dedicated resource for connecting the practice to relevant local resources. Grants to Practices Each practice can apply for competitive small grants of up to \$40,000 to offset initial costs of integration.



SIM Primary Care Practices



Business Consultation MGMA provides resources and assistance to help practices improve business processes and accept alternative payment models. Alternative Payment Models Each practice will be supported with value-based payments from at least one of the seven payers that signed the SIM MOU.

Practice Facilitators and CHITAs Each SIM practices is matched with an approved Practice Transformation Organization that provides them with a Practice Facilitator (PF) and /or Clinical Health Information Technology Advisor (CHITA), as well as other technical assistance.

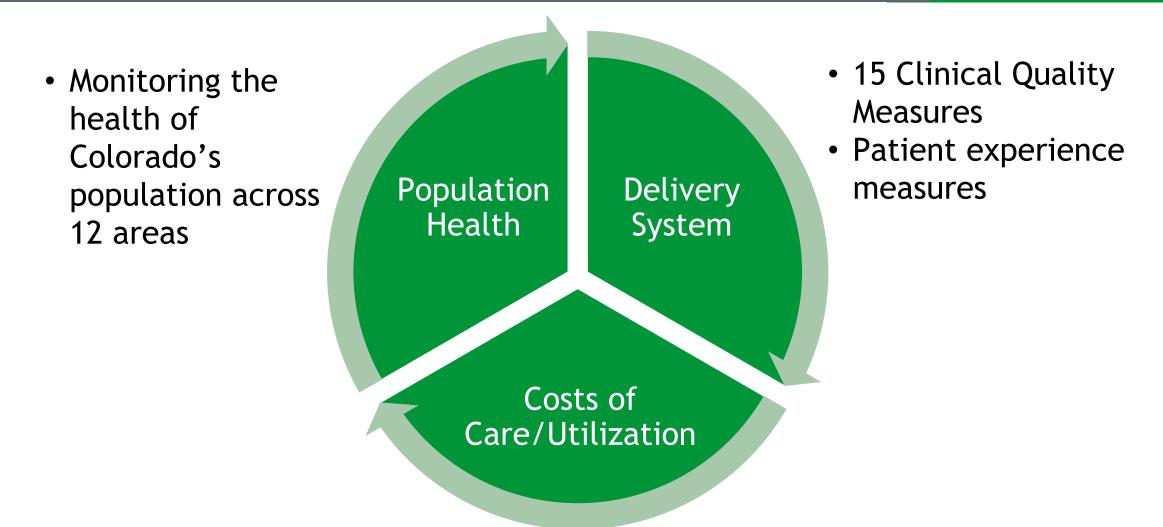
> <u>KEY</u> RHC = Regional Health Connector CHITA = Clinical HIT Advisor PF = Practice Facilitator

LEADERSHIP + COMMUNITY ENGAGEMENT



MEASURING IMPACT





• Per capita total healthcare spending

WORKFORCE OUTCOMES

- 1)Colorado Competencies
- 2) State-wide Learning & Training for Transformation
- •3) Networking & Partnerships
- •4) HRSA BH Workforce Training Grants

WF: OUTCOMES: COLORADO COMPETENCIES

 Colorado Consensus Conference for 8 **Core Competencies** for Behavioral Health Providers working in Primary Care



WORKFORCE OUTCOMES: CONSORTIUMS





CU/SIM E-LEARNING

- Evidence-based findings
- Behavioral Health in
 Primary Care &
 Integration
- Clinical PracticeTransformation
- The landscape- How are others doing BHI?
- Videos for team focus and discussion
- Activities to assess and create plans



All for One and One for All: Colorado State Innovation Model - Learning and Training for Transformation



COLORADO Office of Behavioral Health Department of Human Services



COLORADO Department of Public Health & Environment



SCHOOL OF MEDICINE Department of Family Medicine UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS



GRADUATE SCHOOL OF SOCIAL WORK



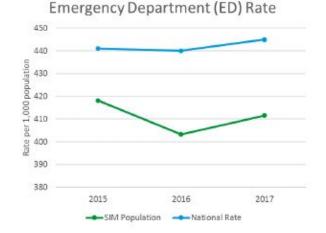
MEASURING SUCCESS

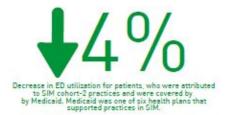




ED Utilization

Patients attributed to practices participating in SIM had 2% fewer ED visits from 2015 - 2017 while there were slight increases nationally.*





These reductions in ED utilization show that investments in preventive care help ensure that patients receive the right care at the right time from the appropriate providers, which helps avoid or reduce unnecessary health care costs.



30-Day Follow-Up and Readmissions

Practices participating in SIM had low rates of 30-day follow-up after hospitalization for mental illness. This measure tracks the follow-up from a behavioral health provider after a hospitalization for a mental health condition, which is difficult data to capture. Practice teams recognize how important it is to follow-up with patients, and the SIM office recommends continued support in this area. However, practices did see decreases in 30-day readmissions for mental health conditions.

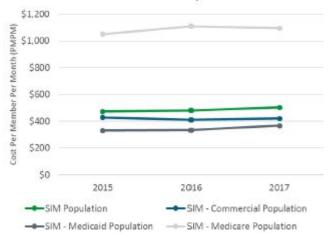


Reduction in 30-day hospital readmissions for mental health conditions for practices engaged in SIM.



Cost of Care

While there was a slight increase in the total cost of care for the SIM population (\$30 per-member-per-month from 2015-2017), this 6% increase is lower than the national average of 7.2%.*



Total Cost of Care by Line of Business

*Data based on preliminary analysis of cohorts one and two practices. Final state and federal evaluation and final report pending. Results may differ.



HRSA WORKFORCE GRANTS

- Institution(DU) & Community Effort
- Appropriate training sites to provide MSW students with the best learning and practice environments
- Focus on rural and medically underserved communities in order to increase diversity and improve outcomes



STEVEN:

"There are some uncharted territories that only those that have been through it can guide a young professional through. Being a mentor for a student or a recent graduate can make all the difference for someone. It's a scary thing to be a new graduate in the world of professionalism. It's even more important to help someone avoid the land minds that are waiting to take a new BHP out. I know I need the wisdom and I am sure that others do too."

PARKER J. PALMER:

Mentors and apprentices are partners in an ancient human dance, and one of teaching's great rewards is the daily chance it gives us to get back on the dance floor. It is the dance of the spiraling generations, in which the old empower the young with their experience and the young empower the old with new life, reweaving the fabric of the human community as they touch and turn."



THANK YOU!





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