

Waiver Update – Stakeholder Process and Workgroups

Raquel Mazon Jeffers
DMHAS Deputy Director
1-26-12



Estimated Timeline of the ASO/MBHO

- July 2012 – ASO/MBHO RFP Posted
- January 2013 – RFP Awarded
- January –April 2013- ASO/MBHO Readiness Review
- July 2013 – ASO/MBHO implementation



Goals of the ASO/MBHO

- To improve access to appropriate physical and behavioral health care services for individuals with mental illness or substance use disorders
- To better manage total medical costs for individuals with co-occurring BH-PH conditions
- To improve health outcomes and consumer satisfaction.
- Reduction in frequency, severity and duration of acute episodes
- Reduction in institutional care and increased use of community-based services and supports



The Steering Group and Work Group Process



The Steering Committee and Workgroup Process

- Key Stakeholders charged with providing workgroup leadership
- Co-chair workgroups with DMAHS/DMHAS staff
- Facilitate development of recommendations in response to specific questions regarding four core domains of the MBHO design and implementation
 - Access
 - Clinical
 - Fiscal
 - Outcomes



Workgroup Summary Recommendations Format

- Each Workgroup should use the following bulleted format to summarize each area in their recommendations to the Steering Group:
 - Key Issues for Consideration
 - Challenges and Opportunities
 - Recommendations for the Steering Group



Access Workgroup

- Describe ways the behavioral health system will provide better access to services that are client centered within an ASO/MBHO
- Provide recommendations about using technology to improve access to behavioral health services
- Provide recommendations about ways the behavioral health system can ensure consumer choice and a “no wrong door” approach within an ASO/MBHO
- Provide examples of a client walking through your recommended system design.



Clinical Workgroup

- Describe how the behavioral health system will ensure a uniform and consistent approach to screening, assessment, placement and continuing care functions while focusing on patient centered care with an ASO/MBHO
- Prioritize strategies that the behavioral health system could use to increase system capacity to provide integrated care for consumers with co-occurring MH/SUDs and BH/PH needs.



Clinical Workgroup

- Describe ways the behavioral health system can utilize the ASO/MBHO to reduce use of acute, high-cost services and increase the use of community-based services, including supportive housing and peer supports
- Describe the specialized services that are need for special populations within the behavioral health system and an ASO/MBHO:
 - Criminal Justice
 - Aging in Youth
 - I/DD



Fiscal Workgroup

- Describe the critical components of a seamless, user-friendly service authorization and claims processing system
- Prioritize the services in the behavioral health system to target for rate rebalancing
- Describe reasonable options for a transition from cost reimbursement to fee for service provider contracts
- Suggest payment strategies that will incentivize provision of good care for reasonable cost



Outcomes Workgroup

- Identify the most effective and meaningful approach to monitoring/measuring outcomes that will also comply with national quality standards (national BH quality strategy)
- Provide recommendations for outcomes measures that will demonstrate quality, value, appropriate level of care and consumer satisfaction
- Prioritize performance outcomes and quality measures that should be used when looking to incentivize providers and the ASO/MBHO.



Timeline for the Steering Group and Workgroup Process

- Workgroups Meet and provide feedback to this Steering Group by March 2, 2012
- Steering Group provides their final recommendations to DHS in early April, 2012.
- Steering Group meetings continue as needed

