



The Civic Federation and Federal Reserve Bank of Chicago

Medicaid Expansion and the Affordable Care Act: A Fiscal Check-up

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Session II: The ACA's Impact on Mental Health Services

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Definitions

Primary Care Medical Home (PCMH): A PCMH serves as the ‘home-base’ for patient care and coordination. It consists of a multi-disciplinary team working together to deliver patient-centered care. The PCMH ensures that the whole patient is care for through the coordination of specialty, diagnostic and other care needed. CCHHS’ community health centers earned Joint Commission Primary Care Medical Home certification in 2015.

Managed Care: Managed care is a system whereby the plan or provider is paid a capitation rate and is responsible for ‘managing’ the care of each patient to ensure cost controls and good outcomes. Managed care plans build networks to ensure the right mix of services are available. *Note:* Illinois requires nearly 100% of all Cook County Medicaid beneficiaries to be enrolled in a Medicaid managed care plan.

ACA Adult: Adults newly eligible for Medicaid under the ACA. No dependents. Earning less than \$16,000 annually.

Provider Led Plan: Provider led plans leverage the best of coverage and care. They assume financial risk, while enjoying opportunity to deliver care in the most efficient manner. Care first. Money second.

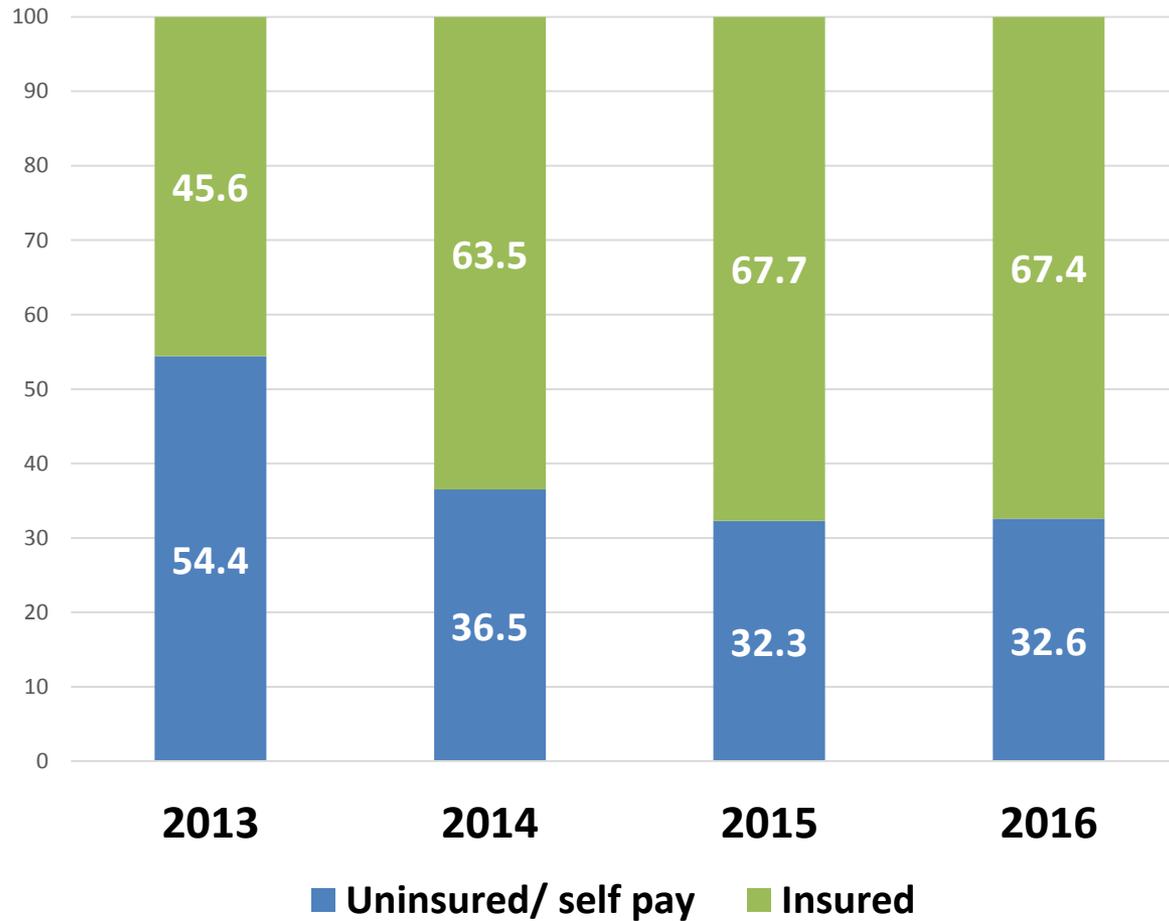
CountyCare: CCHHS’ Medicaid managed care health plan started in 2013 with a current membership of more than 160,000. High utilization of behavioral health services indicates years of lack of access for the ACA adult.

Behavioral Health: Umbrella term to represent both mental health and substance abuse.



Impact of the ACA on CCHHS

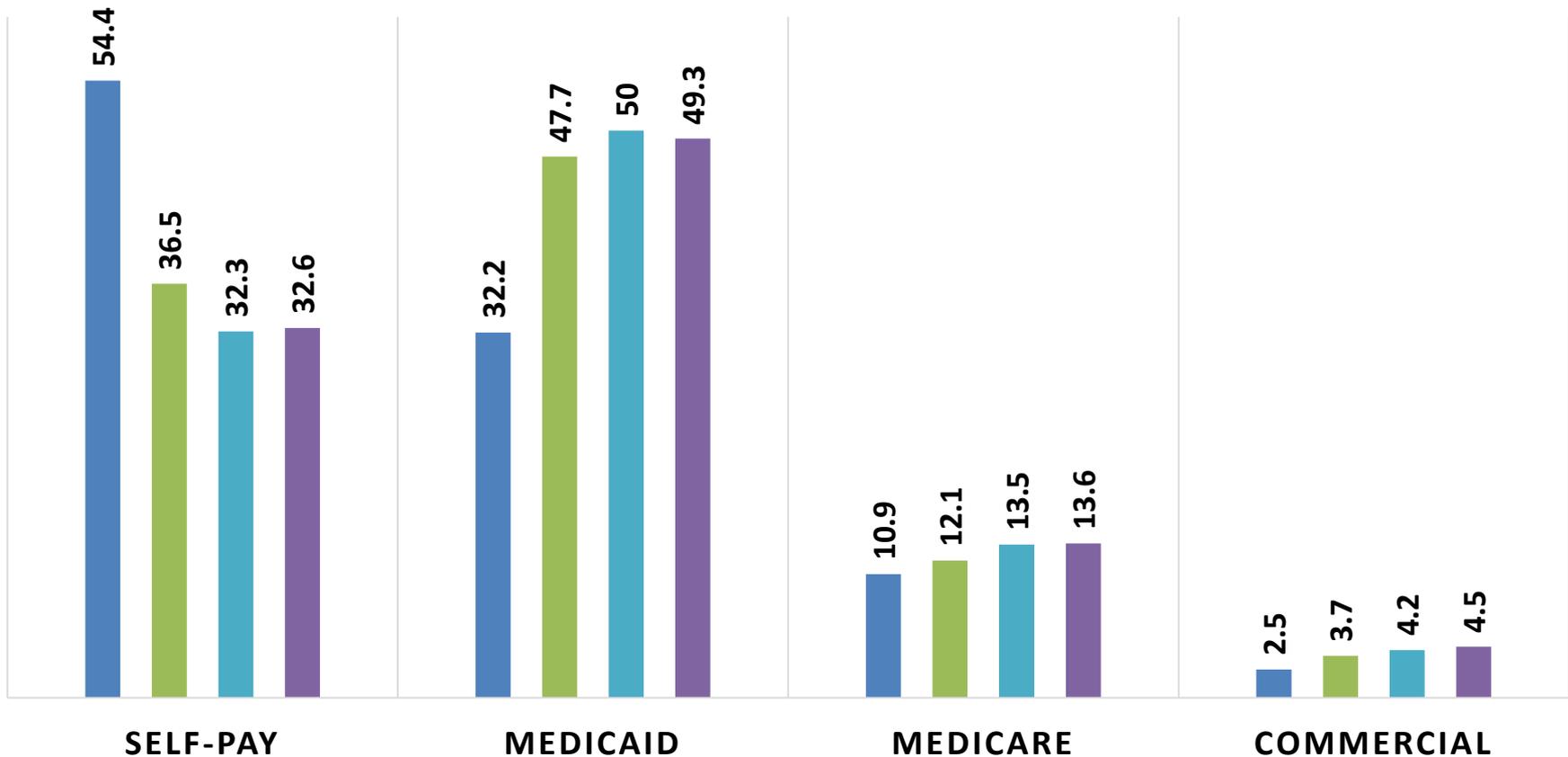
Insurance Status of CCHHS Patients



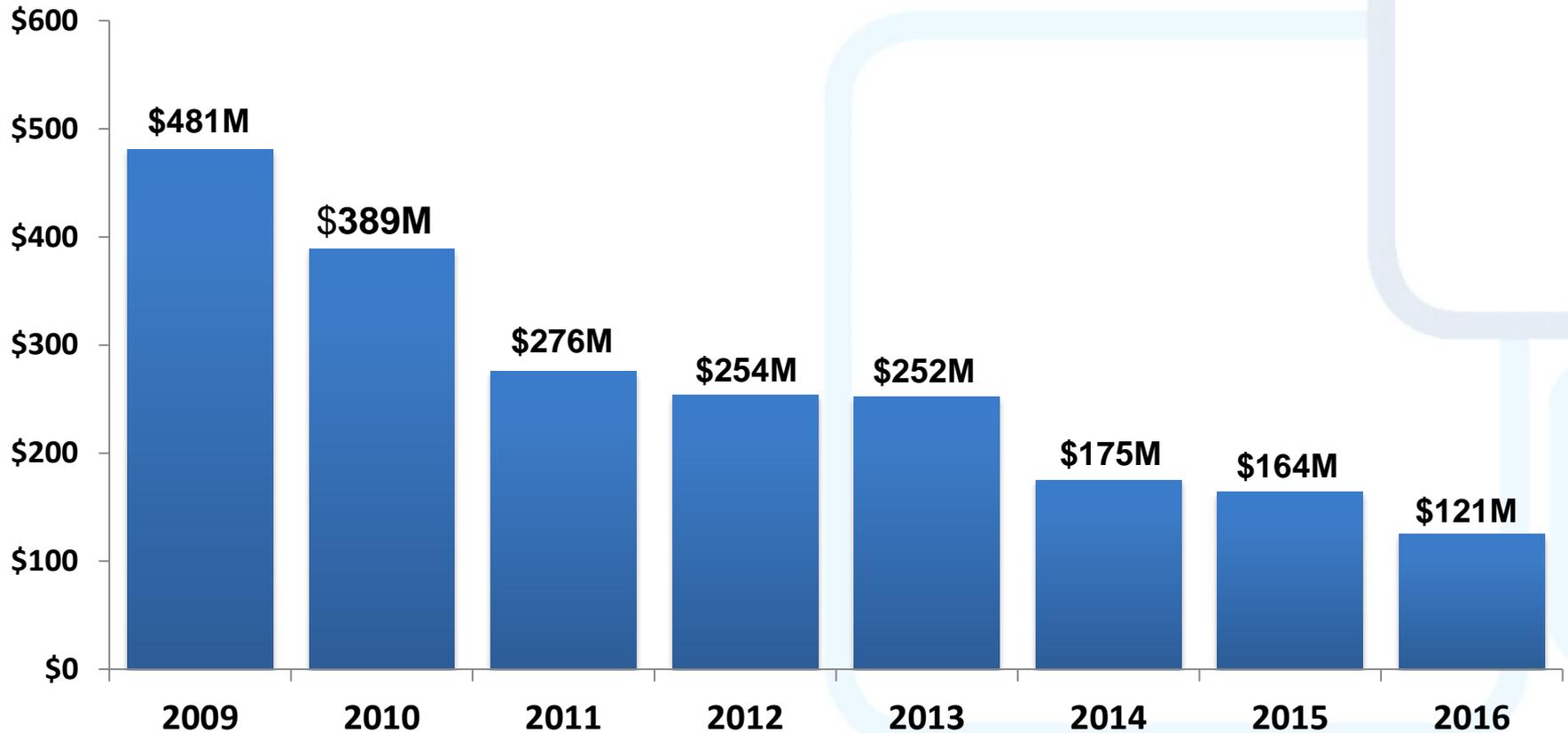
Impact of the ACA on CCHHS

CCHHS PAYOR MIX 2013-2015

■ 2013 ■ 2014 ■ 2015 ■ 2016



Impact of the ACA on Local Taxpayers



CCHHS Behavioral Health Services

CCHHS sees nearly 3,000 unique behavioral health patients every month

- Crisis mental health and substance abuse services within the Stroger Emergency Department and outpatient services.
- Onsite mental health screening, 24-hour crisis intervention and stabilization, psychiatric services, therapeutic services at the Cook County Jail.



About CountyCare

- **162,723 members** including:
 - 70,988 ACA adults
 - 86,703 Family Health Plan (moms and kids)
 - 4,032 Seniors and Persons with Disabilities
- **Vast provider network** including more than 130 primary care access sites and nearly every hospital in Cook County. CountyCare members choose their primary care home.
- ACA adults have **large, unmet health needs** (including behavioral health) from years without access to coverage.
- CountyCare/Medicaid **application process at Cook County jail** has resulted in more than 15,000 individuals with coverage.
- In a 12 month period, CountyCare reimbursed providers more than **\$17.3M for behavioral health care services** provided to CountyCare members. This does not include prescription costs.
 - **Psychiatry and chemical dependence drive a significant portion of the top 1% of spend.**



Why Focus on Behavioral Health?

The PROBLEM

People with mental illness die earlier than the general population and have more co-occurring health conditions.

70
60
50
40



68%

of adults with a mental illness have one or more chronic physical conditions

more than

1 in 5

adults with mental illness have a co-occurring substance use disorder

Vision: Integration of Behavioral & Physical Health

The SOLUTION



The solution lies in integrated care – the coordination of mental health, substance abuse, and primary care services.

Integrated care produces the best outcomes and is the most effective approach to caring for people with complex healthcare needs.

Making the Vision Reality



COOK COUNTY HEALTH
& HOSPITALS SYSTEM
CCHHS

CCHHS Behavioral Health Initiatives

24/7 Community Triage Center (Pilot Program in Roseland)

Goal: to divert hundreds of individuals from local emergency departments and the Cook County Jail in the first year.

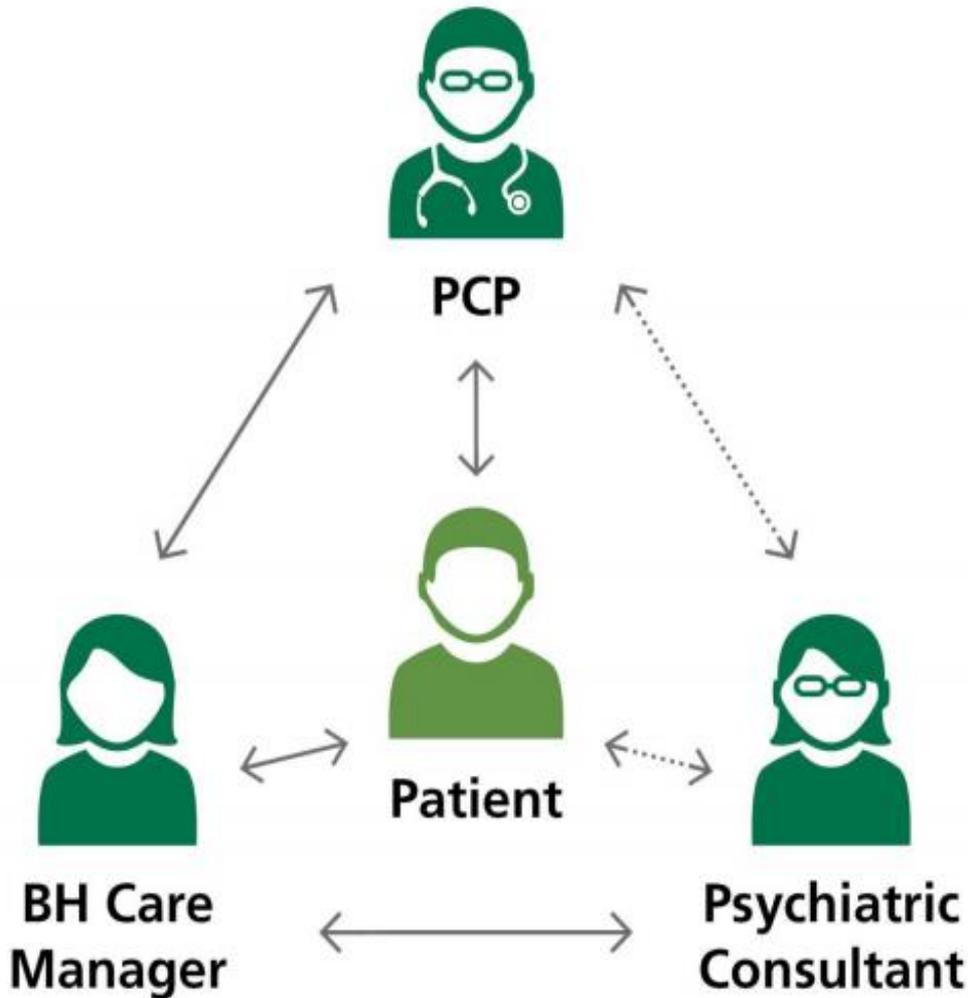
- Joint effort between President Preckwinkle, CCHHS and the Cook County Justice Advisory Council
- Will provide early intervention services for individuals who are at risk of detention or hospitalization due to behavioral health conditions
- Work closely with community agencies and the Chicago Police Department

Start Date: Summer 2016



CCHHS Behavioral Health Initiatives

Integrating Behavioral Health into Primary Care Medical Homes



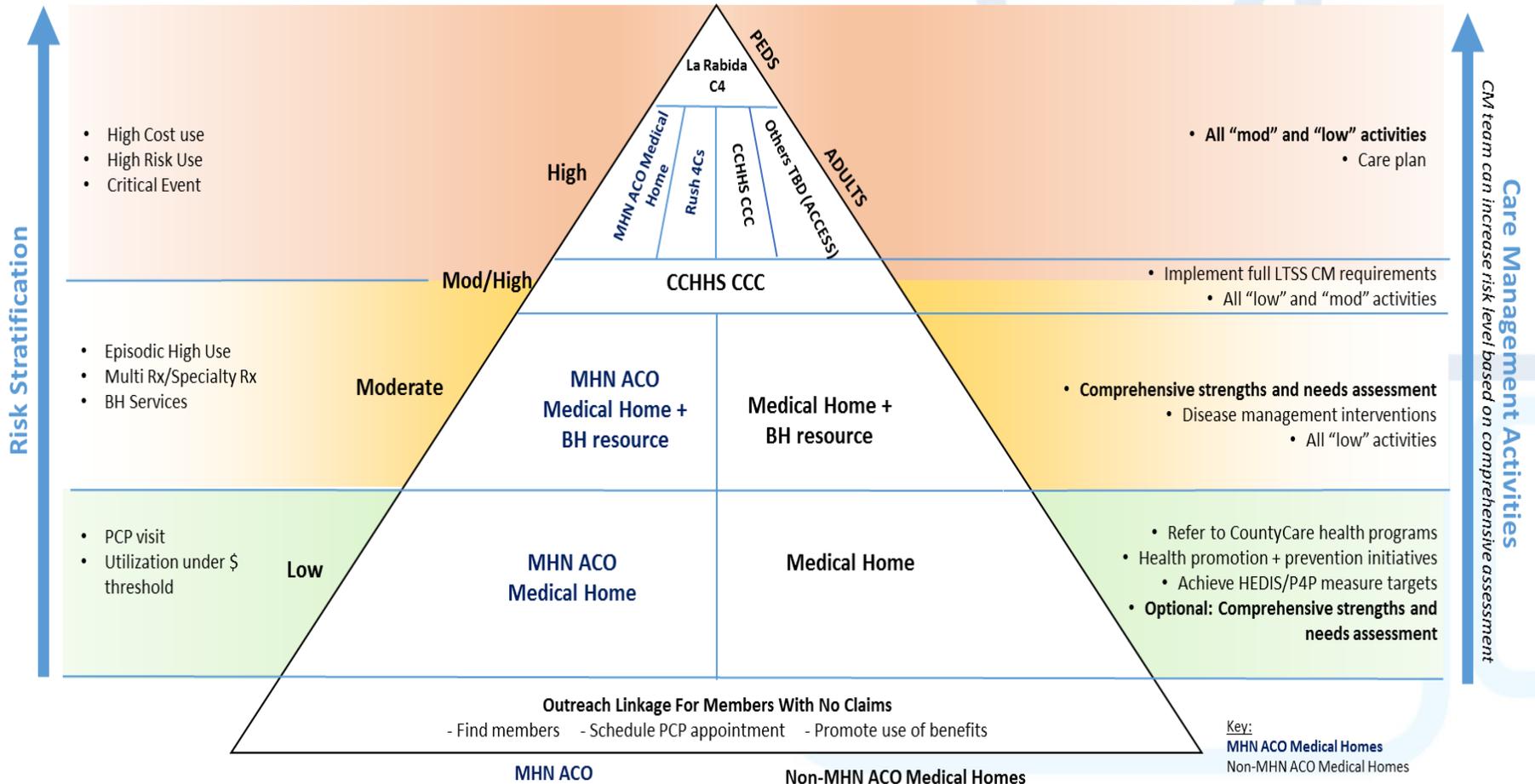
The **Patient** seeks help, discloses symptoms, participates and engages in treatment, and tracks symptoms.

The **PCP** identifies patients, introduces Collaborative Care, makes an initial diagnosis, and initiates treatment (prescribes medication, referral to psychotherapy, or both).

The **Behavioral Health Care Manager** engages patients, tracks patients in a registry and provides care management, brief crisis management, measurement-based treatment to target, and optional evidence-based therapy.

The **Psychiatric Consultant** provides caseload consultation (reviews patient registry), supports team assessment and treatment, and delivers optional direct evaluation (in person or televideo).

Case Management Model



NEW MEMBERS: Screen at medical home (HRS) → provisional risk group
ESTABLISHED ≥ 6 MONTHS: Claims + real time utilization data (IP/ED) → risk group



CCHHS Behavioral Health Initiatives

Integrating Behavioral Health into Primary Care Medical Homes

Goal: Provide a full portfolio of outpatient behavioral health services through CCHHS' primary care medical homes.

- The vast majority of individuals with behavioral health conditions present in the primary care setting and not in a specialty behavioral health clinic.
- Evidence indicates that primary care settings can effectively treat and manage individuals with mild to moderate behavioral health needs and, in many cases, prevent the escalation of illness requiring specialty behavioral health services, including inpatient services.
- Proper and comprehensive care management is the key to CCHHS' strategy to reduce unnecessary hospital visits.

Start Date: Implementation underway.



CCHHS Behavioral Health Initiatives

Behavioral Health Consortium (CountyCare)

Goal: Transform and leverage limited community-based care.

- Provide CountyCare primary care providers with access to a single point of contact when in need of services for a CountyCare patient.
- Each call will be triaged and appropriately referred to a community-based mental health or substance abuse provider.
- Transition services for patients needing post-acute care
- Education and consultation to primary care providers
- Faculty for a behavioral health learning collaborative

Start Date: Spring 2016



CCHHS Behavioral Health Initiatives

Expanded Substance Abuse Treatment

Goal: expand availability of opioid treatments to at-risk patients in the event of an overdose.

- Community-based substance abuse services have declined due to funding.
- CCHHS currently provides substance abuse treatment at the Cook County Jail and in its emergency rooms.
- Develop clear guidelines for the distribution of naloxone for at-risk patients.
- Educate and teach users and their friends and family members about how to effectively use treatments such as naloxone in an overdose situation.

Start Date: Implementation underway



Thank you



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