

CYBHWG Behavioral Health Integration (BHI) subgroup

January 3, 2023

Leads: Kristin Houser and Sarah Rafton

Community Health Worker (CHW) grants

Christine Cole, *Health Care Authority (HCA)*

See page 4 for slides

Highlights:

- Currently in the process of contracting with clinics with 5 clinics signed prior to the new year.
- Currently working with University of Washington (UW) on CHW mixed models, evaluations, and reporting requirements, then plan to utilize the information to share back on lessons learned, as well as details around CHW's in clinics.
- We are looking at options to do some sort of survey or focus groups for families that participate in CHW services over the next couple of years.
- Hiring a community health integration program manager to support the CHW grant and all the associated work that goes with the role including defining the role, framing responsibilities and technical assistance.
- Met with different state Medicaid agents to talk about how they've been implementing sustainable reimbursement for CHW's; just finished the interviews and are in the process of compiling and documenting the learnings.
- To understand what tribes and Indian organizations may need to consider participating in this grant, the office of tribal affairs has supported the process of setting up a listening session that will take place January 19th.
- Literature around outcomes is important to capture and use as a qualitative component to understand experience from families and clinics to see if the CHW program is working.
- NW Pediatrics is using CHW's, with a narrow focus of connection since it is in the beginning stages.
- Possibly bring back information with folks currently using navigators or CHW's to share processes and outcomes.

Chat:

[UW Patient Care Quality and Safety website](#)

If interested in receiving correspondence, subscribe to [Pediatric Health GovD](#)

Primary Care Payment Transformation

Highlights:

- If funded would allow clinics a Full Time Employee (FTE) per 5000 kids on Medicaid.
- Since primary care payment transformation was not included in the preliminary budget, it will be a future topic of discussion to determine the best way forward.

- Possibly use a broad approach for subcommittee behavioral health focus on the 3 codes already identified.
- Support 1115 transformation waiver models; currently working with Behavioral Health (BH) providers to determine needs.

Chat:

- [MTP renewal | Washington State Health Care Authority](#)

BHI Start-up grants

Becky Carrell, HCA

See page 9 for slides

Highlights:

- Webpage draft complete with the estimated launch date of January 2023.
- Start-up grant application is open through February 14th, then it will take approximately 2-3 weeks to go through applications.
- Estimating Grant awards will take place in March or April.
- Changed the application process to a fillable form, which is reasonably short with specific parameters.

Governor's budget – legislative outlook

Highlights:

- Funding to continue Intensive Outpatient Program (IOP).
- Children's Long-term Inpatient Program (CLIP) bed rate increase.
- 7% BH provider Medicaid rate increases effective 2024; directing Managed Care Organization's (MCO) to give money directly to providers. State base payment also gets 7% Medicaid increases.
- 988 tax will pay for expanding mobile crisis services, crisis stabilization and workforce training.
- Enhanced reimbursement rates for providers that take specialized training to better serve children with development disabilities and intensive needs.
- Establish new school-based health centers and add bh capacity to existing sb health centers.
- Continuing the CHW and primary care funds through 2024 to provide curriculum and training.

Next meeting

- Next meeting is February 7th from 10 to 11:30 a.m.
- Future agenda topics: CHW evaluation, ACH/HUB model, HCA approach to payment transformation, future direction/advocacy for care coordination codes, and PAL/Referral Assist/FAST.

Attendees:

Kelsey Beck, Kaiser Permanente
Kelli Bohanon, WA AIMH
Marta Bordeaux, Child and Adolescent Clinic
Becky Carrell, Health Care Authority (HCA)
Phyllis Cavens, Child and Adolescent Clinic
Teresa Claycamp, HCA
Diana Cockrell, HCA
Christine Cole, HCA
Nicole Earls, HCA
Leslie Graham, UW Neighborhood Clinics
Libby Hein, Molina Healthcare
Bob Hilt, Seattle Children’s Hospital
Whitney Howard, Molina Healthcare
Marissa Ingalls, Coordinated Care
Nat Jungbluth, Seattle Children’s

Bridget Lecheile, WA AIMH
Lily Lo, NW Pediatric Center
Connie Mom-Chhing, Community Health Plan of
Washington (CHPW)
Liz Perez, HCA
Wendy Pringle, HopeSparks
Wendy Skarra, NW Pediatric Center
Daniel Smith, CHPW
Chelsea Stone, CHPW
Mary Stone-Smith, Catholic Community Services
Western WA
Renee Tinder, HCA
Beth Tinker, HCA
Amber Ulvenes, Advocate
Cindi Wiek, HCA



Community Health Worker Grant

Implementing SSB 5693 Sec 211 (103)

January 2022

CHW Grant Updates



Contracting with clinics still in progress



UW VSSL team will design and conduct mixed-methods evaluation



Exploring options to gather families' experiences from the CHW grant

CHW Sustainability Updates



New Community Health Integration Program Manager



Finalized State Medicaid Agency Interviews



Seeking community input

Tribal Listening Session

▶ December 19: HCA Dear Tribal Leader Letter

- ▶ Using Federal match funds, partner with Tribes and Urban Indian Organizations (UIOs) to support CHWs or Community Health Representatives (CHRs) in Tribal and/or UIO primary care settings

▶ January 19: Listening Session

- ▶ Hear Tribes and UIOs input on program design, staffing and resources needed



Questions?

For more information
visit [HCA's Community Health Worker \(CHW\)
webpage](#) or contact
hcachwgrant@hca.wa.gov.

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Behavioral Health Integration Grants

Implementing SSB 5693 Sec 211 (110)

January 3, 2023

Becky Carrell, Deputy Division Director
Medicaid Programs

Proviso Overview

- ▶ \$2 Million provided for one-time grants for clinics to establish behavioral health integration in primary care clinics for children and adolescents. (SSB 5693 section 211(110))
 - ▶ Grants can be \$200,000 per clinic
 - ▶ Grant dollars can be used for:
 - Training to create operational workflows that promote team-based care and evidence-based practices
 - System development to implement standardized assessment tools for universal screening
 - Development of a process or registry to track patient outcomes
 - Recruitment and/or retainment of behavioral health professionals, psychiatric supervision/consultation for the program
 - Developing partnerships with community health centers for patients with higher level needs
 - Developing information technology infrastructure, i.e. electronic health records and registry creation
 - Physical space modifications to support the program

Project Timeline BHI Grant

DRAFT



Develop project timeline, approach, and principles.

Work with HCA's CHW grant team to align approach.

Develop application and supporting materials
Launch Application

Review applications, award grants, disburse funding.

Questions?



Criteria for eligible clinics

- ▶ To be eligible clinics must demonstrate the following:
 - ▶ 35% of their total patients enrolled in Medicaid
 - ▶ Support for BHI program exists at the highest level of clinic leadership
 - ▶ An arrangement for psychiatric consultation and supervision exists
 - ▶ A team-based approach to care exists, including the primary care provider, behavioral health professional, psychiatric consultant, patient and patients family

Criteria for eligible clinics

▶ A plan exists to:

- ▶ Hire a behavioral health professional
- ▶ Create a registry
- ▶ Implement universal screening for behavioral health needs
- ▶ Provide care coordination with schools, emergency departments, hospitals and any other points of care
- ▶ Ensure closed-loop referrals to behavioral health specialists
- ▶ Where clinically indicated, engagement in specialty treatment

THANK YOU!

Contacts

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