



Behavioral Health Integration

5/10/16

Behavioral Health Vision



To create innovative solutions that drive quality healthcare for vulnerable populations.

OUR VISION

To establish a national presence as an industry-leading health solutions organization for children, Medicaid and specialty therapies

OUR GOAL

To improve outcomes and deliver savings through innovation



Leadership Transition Team- BH



- **Ryan Sadler**
 - *CEO & Plan President*
- **Julie Rothacker**
 - *Sr Director Clinical Business Development and Implementations*
- **Meredith Cinman**
 - *Clinical Implementation Manager*
- **Michelle Brochu**
 - *Sr Director Network Implementations*

National Behavioral Health Experience



- Contracted with health plans and government agencies to provide behavioral health benefits
- Serving over 3 million members in 19 states, including rural and urban areas
- Integrated partnership with Nebraska Total Care

EXPERIENCED

In business since 1994

ACCREDITED

NCQA

URAC

POPULATIONS

Medicaid (TANF)

CHIP

ABD/SSI

Child Welfare System

Waiver Populations

Medicare

SPECIALTIES

Behavioral Health

Foster Care

Specialty Therapy and
Rehabilitative Services (STRS)

Specialized School Services

Community Re-entry

Behavioral Health Statistics Nationwide



- **3,000,000** Members served
- **43%** Reduction in inpatient admissions for members participating in the Caring Voices program
- **Four** Private Special Education Day School campuses operated in Arizona
- **Six** Consecutive years the Parent Satisfaction Rating has exceeded **90%** in our private special education day school programs
- **81%** Decrease in foster children receiving five or more psychotropic medications within one year of implementing the Psychotropic Medication Utilization Review (PMUR)

Nebraska Total Care Programs



INTEGRATED CARE INCLUDES

An Integrated Care Model of Case Management

- Medical Director
- Medical Nurses
- Behavioral Health Clinicians
- Social Workers
- MemberConnections Reps
- Pharmacy Coordinator
- Non Clinical Staff
- Member/Family
- Member Physicians

Disease management programs for members with Depression, Perinatal Substance Use, ADHD, and Anxiety

- PMUR (psychotropic medication utilization review)
- Clinical Training for network providers and stakeholders
- Provider UM, CM, and provider training for STRS

NTC BH Programs Cont.



- **Independently licensed behavioral health professionals** perform clinical reviews utilizing InterQual and ASAM, nationally recognized medical necessity guidance.
- **Care Coordinators** and Intensive Care Managers reach out directly to members to coordinate care, provide support, and minimize barriers.
- **Disease Management** works to improve overall health, not just behavioral health; current programs include Depression, ADHD, Anxiety, and Perinatal Substance Abuse.
- **Clinical Training** for providers and staff to enhance the quality of clinical services within our network, including long term care, behavioral health, behavioral management, SBIRT, and evidence based practices.
- **Comprehensive service plans** including goals involving employment, housing, education, and social involvement.
- **Present in urban and rural markets** with broad cultural diversity that offers the most choice for our members.

Behavioral Health



60% Reduction in inpatient psychiatric hospital days and successful outreach to members engaged in Intensive Case Management services

FOCUS ON MEMBER OUTCOMES

- Discharge Toolkit
- Build-A-Bear
- Caring Voices Phone
- MyStrength
- Perinatal Outreach
- Integrated Rounds
- Successful Contact within 6 days
- Child Safety/Medication Adherence
- Disease Management

Clinical Philosophy



- **Quality treatment**
 - Evidence-based standards of care
 - Demonstrated efficiency in addressing the member's problems
- **Integrated care coordination**
 - Multi-disciplinary clinical teams
 - Focus on the whole person rather than just the behavior or physical diagnosis
- **Local health plan**
 - Member supported by local staff who understand the culture, delivery systems and available community resources
- **Engage members and advocates**
 - Directing how services are provided to support the management of their own healthcare needs

Clinical Philosophy



The NTC Clinical Management Program strives to ensure

- Member care meets Medical Necessity Criteria
- Treatment is specific to the member's condition, is effective and is provided at the least restrictive, most clinically appropriate level
- Services provided comply with quality improvement requirements
- UM policies and procedures are systematically and consistently applied
- Focus for members and their families centers on promoting resiliency and hope

Provider Network



- **Comprehensive provider network** offers patient-centered health homes, peer services, and tele-health.
 - **Individual providers:** Psychiatrists, advanced nurse practitioners, psychologists, independently-licensed master-level clinicians, and rehabilitative therapists
 - **Group providers:** Community mental health centers, chemical dependency treatment facilities, Federally Qualified Health Centers (FQHC), and local hospitals
- **Timely claims processing:**
 - Process 99.7% of all claims on average within 30 days
 - Average time from claim receipt to paid claim is six days
 - Financial accuracy, as calculated by a separate auditing team, is 99.5%

Provider Network



- Provider Contract is integrated for any provider type whether Physical Health or Behavioral Health
- Credentialing documents will capture data specific to Behavioral Health Provider Types
- Mailings scheduled for week of 5/9/16 to reach all independent providers not tied to a Health System or PHO

Provider Network



Behavioral Health Provider Contacts:

- Phone 855-688-6589
- Email at networkmanagement@nebraskatotalcare.com
- Fax at 844-536-2997
- Or by postal service at the following address:
Nebraska Total Care
Network Development: NE
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Contacts



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