

# Behavioral Health Carve-In Public Meeting Minutes

**Location:** Howerton Conference Room 202

**Date:** February 4, 2020

**Time:** 3:30 PM

## Attendees:

### Mo HealthNet Division

Jessie Dresner, Eric Martin, Jamie Purnell, Amber McKenzie, Roxanna Halderman, Nanci Nikodym, Michelle Kohrmann, Natascha Medley, Lori Reed, Molly Kempker, Ashley Wilson, Jennifer Parker, Rebecca Logan

### Children's Division

Christina Baker, Lisa Hueste, Tasha Toebben, Stacie Frueh

### Mental Health Division

Connie Cahalan, Donna Siebeneck

### Division of Legal Services

Lisa Hogg

### Family Support Division

Patrick Luebbering

### Outside Organizations

Justin Alferman, Katie Plax, Brian Kinkade, Sarah Willson, Heidi Strickler, Lori Ross, Al Greimann

## Meeting Content:

### Behavioral Health Carve-In Presentation

- Jessie Dresner with MO Healthnet Division (MHD) opened the meeting and thanked everyone for their attendance. MHD staff encouraged stakeholders and community members to provide constructive feedback. In addition, suggestions grounded in evidence-based research were encouraged. Ms. Dresner invited stakeholders and community members to review the Transformation Report on the MHD website (<https://dss.mo.gov/mhd/mt/docs/mhd-rapid-response-review.pdf>). MHD will continue to focus on Quality of Care to promote better health outcomes.

Ms. Dresner discussed utilizing a value-based reimbursement model as recommended from the Transformation Report to promote better health outcomes. MHD plans to research and communicate with other states and their stakeholders. She stated that questions are welcomed and answers will be provided in a timely manner.

- Dr. Eric Martin with MHD presented slides regarding the proposed carve-in of behavioral health (BH) services. Dr. Martin reviewed the current state of BH services for children and youth in the care and custody of the state and receiving adoption subsidy assistance, category of aid 4 (COA 4), including the BH services provided to them through Fee-for-Service (FFS). Dr. Martin discussed additional BH services MHD plans to carve-in for foster youth.

## Open Floor for Questions and Comments:

1. Name: Brian Kinkade

Organization: Missouri Hospital Association

Mr. Kinkade informed the group that he sent in written comments. He expressed concerns that COA 4 children and youth may not receive adequate access and quality of care if their BH services are carved into Managed Care. Mr. Kinkade encouraged MHD to focus on value/positive outcomes and reimbursement streams that are fair. Mr. Kinkade stated that although Managed Care Organizations (MCOs) provide care management as part of their package, they seem to be more focused on cost savings. He suggested MHD look at other successful models, such as Health Homes. According to Mr. Kinkade, solutions like Health Homes could produce positive outcomes for foster care youth. He would like MHD to consider alternative models and provider led care coordination. Mr. Kinkade encouraged MHD to pursue contract provisions for MCs, but stated he is not confident MHD can enforce the provisions. Lastly, Mr. Kinkade reported support for using a Value-based reimbursement model because they believe it will promote better outcomes.

2. Name: Lori Ross

Organization: Foster Adopt Connect

Ms. Ross presented feedback from Foster Adopt Connect and the families they serve throughout Missouri (she provided testimonies from foster and adoptive families). Ms. Ross stated that many high needs kids have to opt out of MC in order to receive basic needs like diapers and equipment. She expressed concern that children and youth with high needs will not receive the quality care they need through Managed Care. Additional barriers to care include changes with the MCOs during the bid process, loss of providers not contracted with a MCO, and the inability for providers to enroll new clients due to full panels. Ms. Ross reported concerns about BH accessibility issues and adequate credentialing of providers in rural areas. She is concerned that carving in BH services into MC will create more barriers and hinder families' desire to foster. The organization reported concerns for low provider enrollment and low provider reimbursement. However, the organization supports care coordination for foster youth. Ms. Ross discussed that Oregon pursued a similar BH carve-in approach and the results fell short and did not increase quality and access to care.

3. Name: Al Greimann

Organization: Royal Oaks Hospital

Mr. Greimann informed the group that he sent in written comments. Royal Oaks has seen an increase in length of inpatient psychiatric stays due to placement issues impacting discharge and aftercare planning. On average foster youth are in inpatient for 7-10 days due to residential or foster placement issues. Mr. Greimann and Royal Oaks are concerned that there will be

insufficient reimbursement for keeping youth in their hospitals for longer periods of time due to issues associated with aftercare placement. If hospitals are not funded appropriately for the care of the foster youth, then they will experience issues with remaining financially stable. Royal Oaks reported support for care coordination and collaborating with MCOs.

4. Name: Dr. Katie Plax

Organization: Washington University/The Spot

Dr. Plax submitted written comments in person. She has served as the Medical Director for 11 years at the youth center called “The Spot”, which is a medical center for young people and foster youth between the ages of 13-24. The Spot has provided comprehensive services (Behavioral Health, Physical and Mental Health) since 2011. Dr. Plax advocated for increased wrap-around services for foster youth after hospitalization and after the termination of foster placement. Dr. Plax encouraged MHD to review evidence-based research on the “medical home” model, which serves as the empirical foundation for The Spot. Dr. Plax reported positive outcomes associated with this model, and she offered to share these findings, including improved 30 day assessment rates, improved immunization rates, and improved follow-up with specialists. Dr. Plax expressed concern about hospital boarding while awaiting appropriate placement and services due to BH needs. Dr. Plax expressed concerns about access to needed BH services and acknowledged this is a problem in Missouri and in the country as a whole. Dr. Plax expressed the desire to collaborate with MHD and be a part of the solution for these concerns. She expressed that she is in favor of creative problem-solving and would like to be able to continue their model.

5. Name: Dr. Patsy Carter (by phone)

Organization: Center for Excellence and Child Well Being

Dr. Carter has been in the mental health field for 29 years. Dr. Carter highlighted the lack of BH providers and inaccessibility of BH providers in the state. She recognizes that foster youth are constantly moving across the state and their coordination of care suffers as a result of this. Dr. Carter describes the mental health system in Missouri as fragmented, and encouraged that MHD understand the subsystems of foster youth. Dr. Carter reported support for a greater balance of services and continuity of care especially for high needs foster youth (e.g., residential facilities). Dr. Carter expressed that she sees value in DMH services and health home programs, but is concerned that they are underfunded, which results in children and youth coming into foster care in order to access BH services, which should never happen. Dr. Carter expressed concern over increased incidence of youth with severe aggression and severe self-harm behaviors, including swallowing and inserting, which results in emergency department visits and inpatient medical hospital admissions and the hospital system is unable to care for children with these very severe behaviors.

6. Name: Mary Chant (by phone)

Organization: Missouri Coalition of Children's Agencies

Ms.Chant reported issues with a shortage of BH providers, untimeliness of services for foster youth, and poor quality of care. Mary advocated for increased coverage for foster youth and more BH providers. She expressed that she is looking forward to working with the state to address these concerns.

**Meeting Adjourned at 4:30pm.**

**Next meeting:**

March 25, 2020

9:30am – 11:00am

Mo HealthNet Conference Room 202