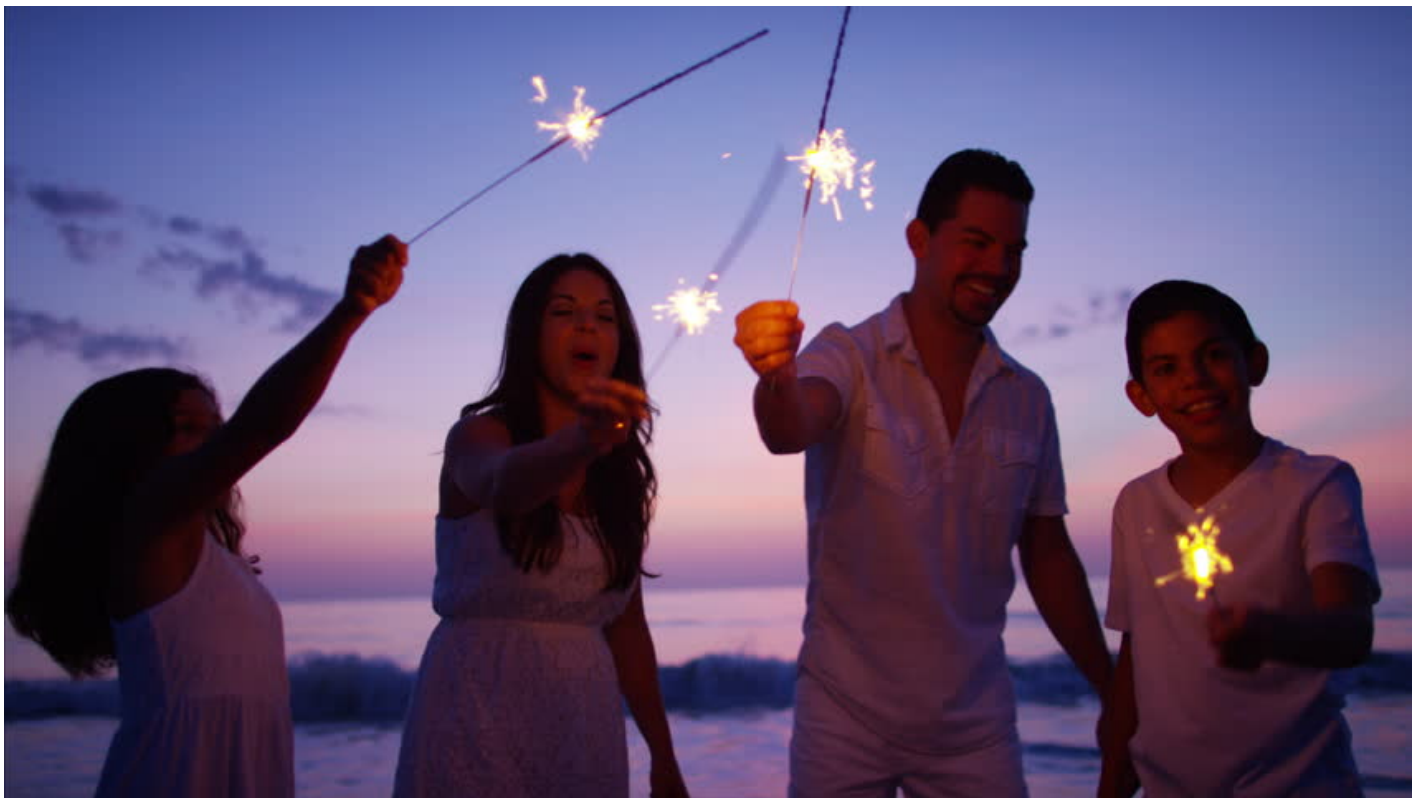




CBHS IPA Newsletter

August 19th, 2019

General Edition



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This is the 2nd issue of the CBHS Newsletter. We are hoping to make this a monthly newsletter coming out around the middle of each month. This is aspiration. Please don't hold us to an exact date.

In the News:



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Innovative Management Solutions NY (IMSNY) Formed

On August 16th CBHS and CBC signed the Operating Agreement for IMSN. This is the first official recognition of IMSN as an operating entity. Though there is still a great deal of work to be done, we are pleased that the work we have done has resulted in this important step.

IMSN is being formed to acquire a data warehouse and analytics platform that will help CBHS and CBC move toward sustainability as envisioned by the BHCC Awards.

For further information, please contact us at newsletter@cbhsinc.org.

Healthcare Data Breaches Cost an Average of \$6.5 Million:

A recent study by the Ponemon Institute and IBM Security revealed that the average healthcare data breach costs the organization \$6.5M or \$429 per record. This per record figure is three times higher than the average for all industry data breaches.

For more information, click [here](#).

1 Million Americans have Recovered from Opioid Use Disorders, a Study Estimates:

For Becker's Hospital Review, Mackenzie Bean - An estimated 1.2 million Americans have achieved long-term recovery from opioid use disorder, according to an [study](#) published in the *Journal of Addiction Medicine*.

For the study, researchers from Boston-based Massachusetts General Hospital analyzed data from the 2017 National Recovery Survey, which featured a nationally representative sample of U.S. adults who reported resolving an opioid issue. Researchers compared this group to a sample of adults who achieved long-term recovery from alcohol use disorder.

They found people who achieved long-term opioid recovery were more likely to use the following resources compared to individuals who recovered from alcohol use disorder:

- Formal addiction treatment
- Medication-assisted treatment
- Recovery support services
- Mutual help, such as Narcotics Anonymous

"We didn't find those differences in the first year, and this is important because taken together it suggests that individuals with an opioid problem might require additional treatment or additional resources to achieve longer and more stable recovery duration," study author Lauren Hoffman, PhD, a postdoctoral research fellow at Massachusetts General and Boston-based Harvard Medical School, said in a [news release](#).

AHIP Commends Moves To Address Social Determinants of Health for Medicaid Enrollees:

WASHINGTON, D.C. – July 26, 2019 – Matt Eyles, president and CEO of America's Health Insurance Plans (AHIP), issued this statement following the

introduction of the *Social Determinants Accelerator Act of 2019*— a bipartisan proposal aimed at addressing social barriers to health such as housing, healthy food, and reliable transportation for Medicaid enrollees. The bill was introduced by Representatives Cheri Bustos (D-IL), Jim McGovern (D-MA), Tom Cole (R-OK), and Cathy McMorris Rodgers (R-WA).

“A person’s health is influenced by several non-medical factors, including the conditions in which people are born, grow, live, work and age. Social barriers, such as reduced access to housing and healthy foods, can lead to poorer health for people, families, and communities. Health insurance providers are committed to improving the health of the individuals we serve – and the communities where they live.

“We commend Representatives Bustos, Cole, McGovern, and McMorris Rodgers for demonstrating strong leadership to address social determinants of health. Their proposal will strengthen the partnerships between Medicaid Managed Care Plans and community-based organizations to build effective solutions to tackle social barriers, drive value, and improve whole-person care for millions of Americans.

“We look forward to working with Congress, local policymakers, doctors, hospitals, and community leaders to improve whole person and community health, enhance quality of life, and drive down costs for everyone.”

A summary of the act can be found [here](#).

How Medicaid Can Save Money and Lives: Tennessee Tries Mind-Body Integration

Anne-Marie Kommers - Thursday, August 8th, 2019, Becker’s Healthcare

A program launched in 2016 in Tennessee (Tennessee Health Link) pays bonuses to behavioral health providers for guiding clients through their physical health needs. In 2017 mental health providers were paid nearly \$7 million in bonuses.

For more on Tennessee Health Link, please click [here](#).

For the source article, please click [here](#).

Mental Illness Doesn’t Trigger Carnage

By Glen Liebman, Albany Times Union Op-Ed

Every mass shooting in the United States has been followed by the chorus of people who lay the blame entirely on mental illness. The causal factors behind mass killings is complex. Social scientists and policymakers should be focused on trying to better understand this phenomenon rather than latching onto a convenient scapegoat such as mental illness.

For the source article, please click [here](#).

Chief Clinical Officer (CCO) Report:



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By Mark Sasvary, CCO of CBHS IPA.

It's been an exciting summer here at CBHS as we continue to build out a new data analytic platform through our joint venture between Innovative Management

Solutions New York (IMSNY). This work surrounding our ongoing CBHCare MVP data exchange will inform our work as CBHS continues to use the expertise of Health Management Associates. We also want to thank the our participating CBHS agencies' work on this important project. I am confident that their collective efforts will help define our network as leaders of community behavioral health in the country.

Furthermore, our CBHCare MVP data analytic platform – Garage – launched on 8/13/19. It will be a great new tool to help us track our progress and to inform our strategies to close gaps in care, to engage with our clients, and to ensure our impact on the total cost of care.

CBHS continues to work with our partners at Montefiore on multiple projects including the small-scale PCP project, the Medicare Next Generation contract, the MVP HARP proposal, an integrated care proposal, and innovation proposals related to the Montefiore Hudson Valley Collaborative. We look forward to reporting on these in the coming months.

Additionally, we are improving our work on the Transitions of Care Wellness Program through our partnership with the Center for Regional Health Innovation PMO/Westchester Medical Center PPS. We want to incorporate lessons learned from this project in order to create sustainable models that will continue this important work after DSRIP ends in 2020.

CBHS also is developing capacities through the HCBS Infrastructure Grant as our Care Connections Program has received referrals from its partnered Managed Care Organizations. Additionally, we will be collecting data from our members on this project and will be distributing a survey to determine the best methods to distribute grant funding, to offer support, and to coordinate training for our participating network members. We are committed to making the HCBS referral and assessment process more efficient in order to help our clients connect to these important services.

Lastly, the Quality Oversight Committee (QOC) continues to finalize workflows related to its priority metrics. We will present our finalized workflows during September's QOC Meeting and will incorporate additional metrics to our list of priorities based on the work happening in partnership with the other BHCCs in New York. The QOC also explores initiatives to support Trauma Informed Care and works to support the crucial quality improvement work related to IMSNY.

CBHS Highlights:



Logo provided by NY Health Home Coalition.

OIG Summary - Health Home Report Prepared by Meggan Schilkie, ED of Health Home Coalition

OIG audited health home claims from 2012 - 2016, and selected a sample of 100 claims to review. They found problems with 22 of the 100, and from that extrapolated that 22 percent of all health home claims over the four-year period were problematic. They concluded that DOH was not adequately monitoring the program. The state's rebuttal was pretty robust. DOH stated that they have implemented many changes in the program that have greatly improved program monitoring. DOH also stated that six of the claims came from a single health home that has been closed due to poor performance.

The table below summarizes the deficiencies their finding:

Table 1: Summary of Deficiencies in Sampled Payments

Deficiency	No. of Unallowable Payments*
Care plan not documented or provided, or no beneficiary participation in care plan development	13
Services not documented	5
Services billed incorrectly	4
Services not provided	1
Duplicate services billed	1

*The total exceeds 22 because 2 payments related to more than 1 deficiency.

RECOMMENDATIONS:

OIG recommended that the New York State Department of Health:

- Refund \$65,468,943 to the Federal Government
- Improve its monitoring of the health home program to ensure that health home providers comply with Federal and State requirements for the following:
- Provide services according to a care plan and ensuring beneficiary participation in the development and execution of the care plan.
- Maintain documentation to support services billed.
- Bill correctly for services.
- Bill only for services actually provided.
- Do not bill for services that are duplicated and/or provided under other Medicaid authorities.

In its response DOH identified a series of steps they have taken to improve monitoring of the program. These include:

- On-site Designation surveys, which included technical assistance, quality monitoring to review policies and procedures, quality management activities, and performance improvement projects. (August 2015)
- A state-wide health home tracking system. (April 2016)
- A health home quality monitoring and oversight policy (June 2017)
- Health Home Dashboard
- Health Home Care Management Assessment Reporting Tool

ODDS & ENDS:

Save the Dates!:



NY Medicaid Population Health Symposium:

Save the Date! November 18 – 19

Registration for the NY Medicaid Population Health Symposium at the Grand Hyatt New York is now open:

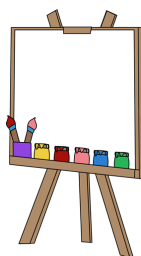
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CBHS BHCC Pet of the Month Submissions:



Please submit pix of your 4 legged (or gilled or feather or scaly) family members and nominate them for the CBHS Family Pet of the Month! Please tell us their name, their breed, their age and their hobbies! Send all pix and nominations to Kimberly Hyacinthe at newsletter@cbhsinc.org.

Calling All CBHS Artists:



CBHS would like to thank Rehabilitation Support Services for donating several beautiful piece of artwork to our donation drive!

We are still looking for art made for for our agencies' clients! We would love to decorate our walls with their creations to pay tribute to all of the wonderful work our agencies and their clients do.

Please let us know if you would like to donate or if CBHS can purchases any client art through your agencies by contacting via email to newsletter@cbhsinc.org.



CBHS BHCC PET of the Month

We would like to introduce Mr. Lionel Hyacinthe! He's a 7 month-old Black Teddy Bear Hamster, who sleeps all day, spends his evenings exploring in a hamster ball and eats blueberries voraciously.