

Moderated by Tim Sweeney, GBPI



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Frank Barry, Commissioner
Department of Behavioral Health and Developmental
Disabilities



Jason Bearden, CEO Highland Rivers Health



One Community Advancing Mind, Body & Health

Life After the DOJ Settlement A Provider's Perspective

PHIGHLAND Stivers HEALTH



You never really understand a person until you consider things from his point of view . . . until you climb into his skin and walk around in it.

- Atticus Finch

- SHIGHLAND Rivers HEALTH

What is Recovery & What is At Its Heart?



It's pronounced...
[MEN-tl IL-nis]

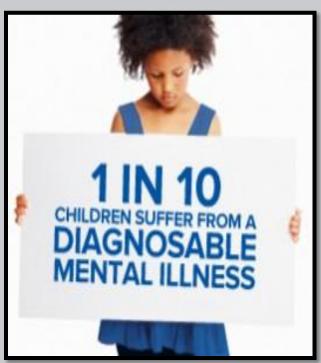
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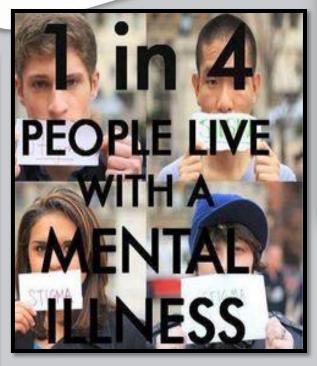
[KREY-zee]

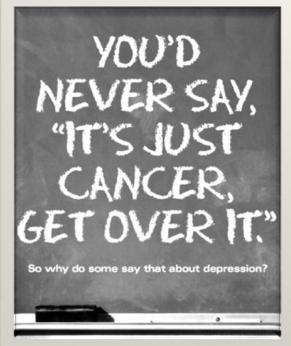
Fight Stigma



stigma (noun)
characteristic
a mark or characteristic
a mark or abnormality
indicative of an abnormality







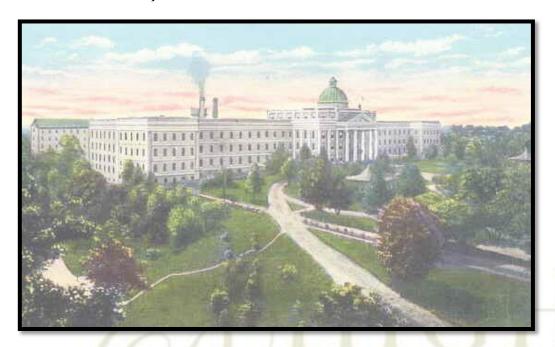
If a physical disease were treated like a mental illness...

Helpful Advice



Georgia's Behavioral Primary Healthcare System

Picture of Central State Hospital circa 1915 "State Asylum for the Insane"



The state mental health authority has historically had the responsibility for overseeing and providing services for adults with serious mental illnesses and children with serious emotional disturbances.

In the state of Georgia, mental health and addiction services are administered by the same agency, the Department of Behavioral Health and Developmental Disabilities (DBHDD).

Georgia's Behavioral Primary Healthcare System

Picture of Central State Hospital circa 2013 "State Asylum for the Insane"



It is estimated that 5% of the Medicaid population has co-morbid mental illness and chronic physical illness, this population drives 40% of the costs for the Aged, Blind and Disabled Population.

How Does Georgia's Community Behavioral Health System Compare Nationally?



How Does Georgia Compare?

According to the United States Census Bureau, the population of Georgia was 9.7 million people in 2010. This is a 40% growth since 1980.

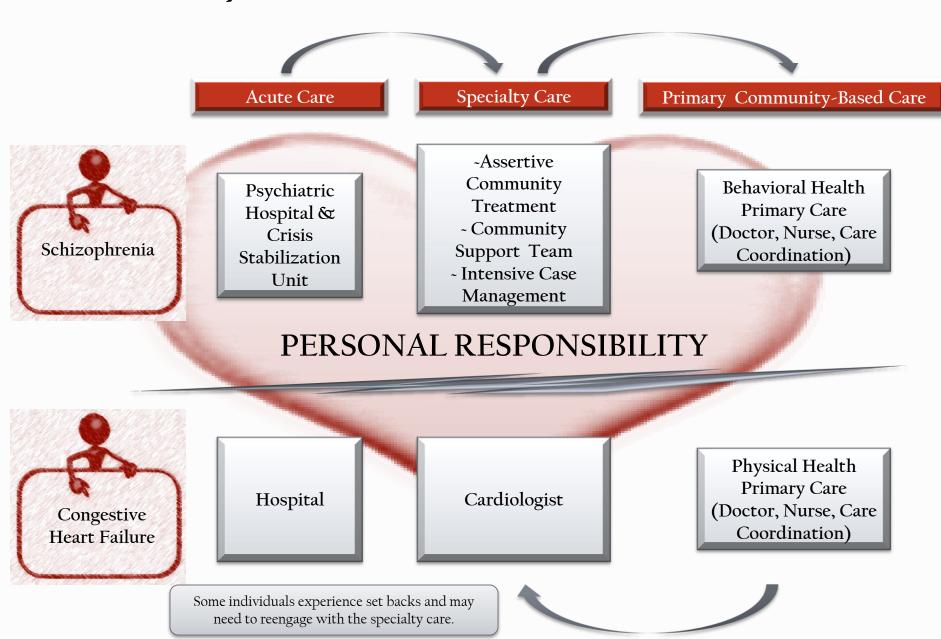
- Population in State Correctional System has increased.
- Population in local jails has expanded.
- Explosion of homelessness.
- Unnecessary burden to the ERs.

Additionally, 20% of Georgians are uninsured, 14% are on Medicaid, and 10% are on Medicare.

The percent of the population with chronic illnesses in Georgia:

Chronic Illness	% of population
Cancers	4.1%
Diabetes	5.1%
Heart disease	5.9%
Mental disorders	11.0%

Chronic Physical Illness vs. Chronic Mental Illness



Without a Strong Community-Based System of Care, the System Fails

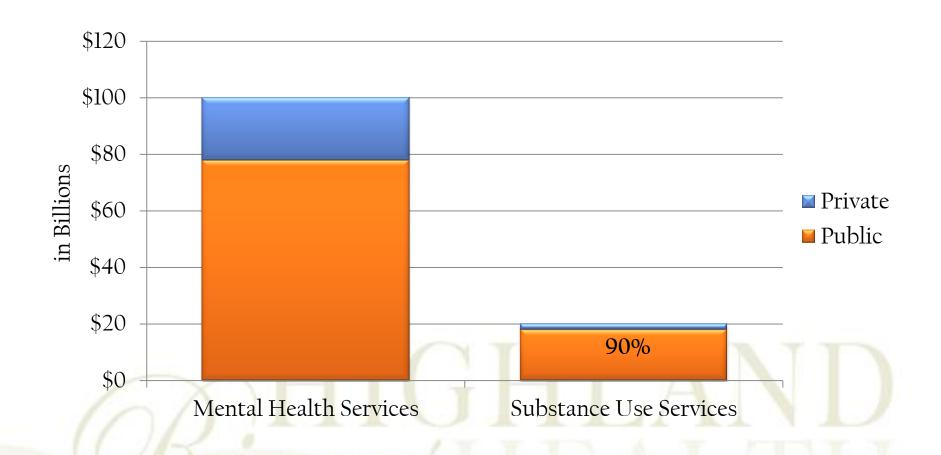
To fill the void created by the hospital closure, the lion's share of funding allocated to meet the Department of Justice (DOJ) Settlement Agreement has focused on an acute and specialty treatment instead of a community-based system of care.

Although needed, without proper funding for core services there is an

- (1) Increase of inappropriate over utilization of psychiatric crisis stabilization and inpatient services.
- (2) High rates of incarceration where the jails and prisons become mental health treatment provider.
- (3) Increased homelessness and over reliance on social services.

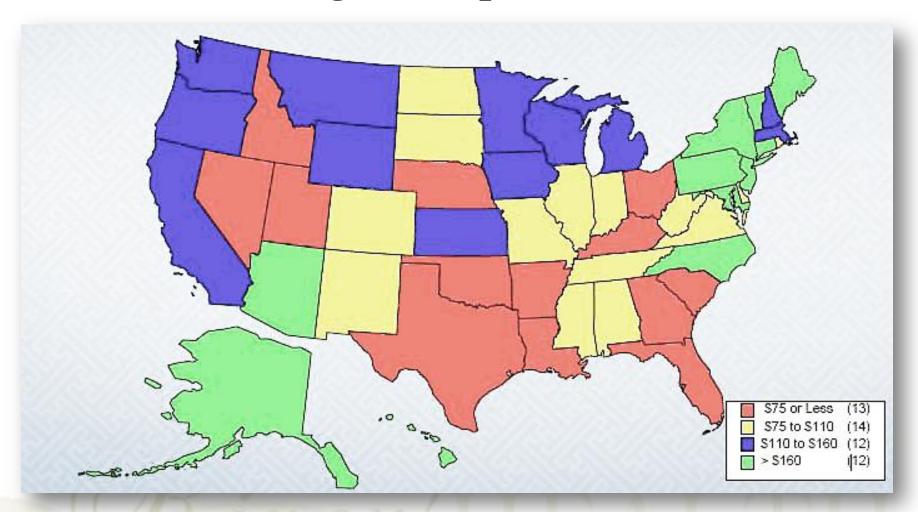


How are Services Funded Nationally?



U.S Department of Health and Human Services. National Expenditures for Mental Health Services and Substance Abuse Treatment

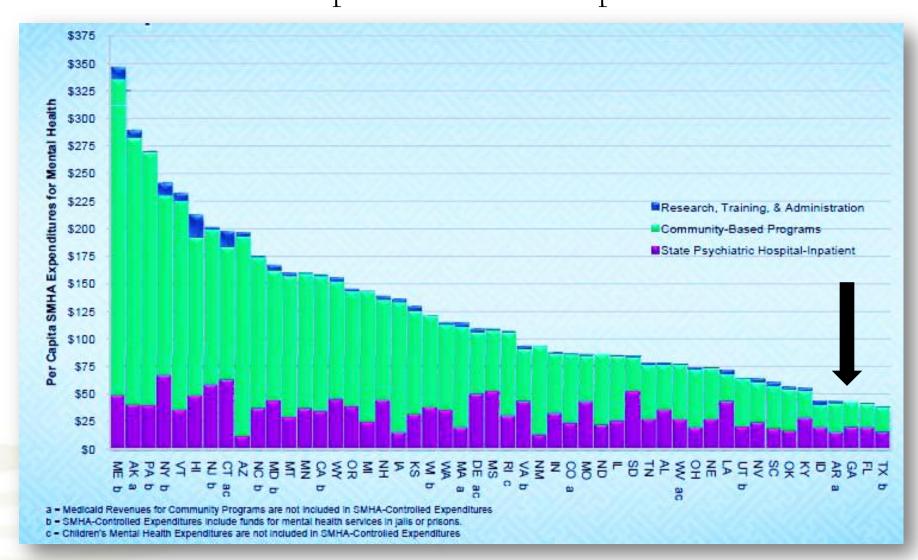
How Does Georgia Compare?



**Per Capita Mental Health Expenses Pre Settlement Agreement, Please Note that the DOJ Settlement Agreement Covered Crisis, Specialty Services,
Not Primary Community-Based Behavioral Healthcare.

How are Services Funded?

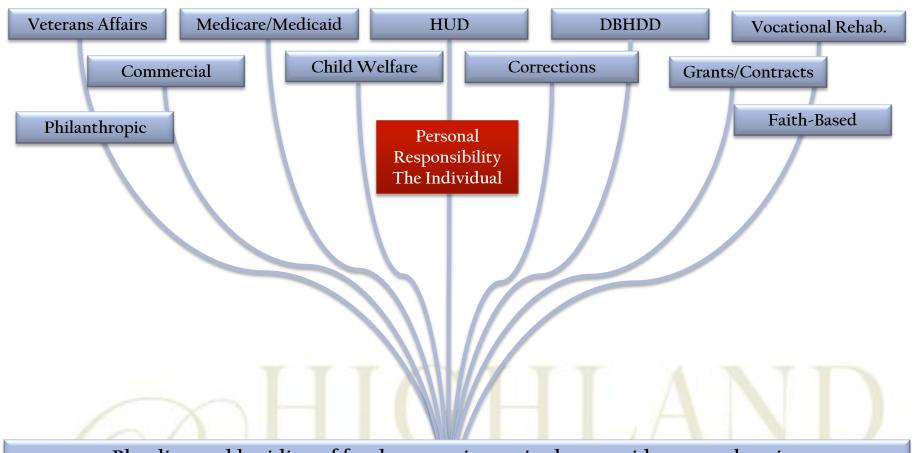
Per Capita Mental Health Expenses



Georgia's Community Primary Behavioral Healthcare Community Services Boards



How are Community-Based Services Funded?



Blending and braiding of fund sources is required to provide comprehensive recovery based services.

Community Services Boards are uniquely positioned to blend & braid funding streams together to strengthen the overall system of care.

Highland Rivers Health, Primary Service Lines

Crisis Stabilization

- ☐ Short-Term Detoxification and Mental Health Crisis Stabilization
- ☐ Men's Short Term Residential & Reintegration Program

Addiction Recovery

- Adolescent Clubhouse
- Women's Outreach (TANF), Intensive Residential & Outpatient Gender Specific Substance Abuse Program
- ☐ Substance Abuse Intensive Outpatient Program

Developmental Disabilities

- ☐ Vehicle & Environmental Accessibility and Adaptation Services
- ☐ Host Homes
- ☐ Community Residential Alternative & Living Supports
- ☐ Respite
- ☐ Community Access Services
- ☐ Family Support Services Autism Family Support Funds
- ☐ Prevocational Services & Supported Employment



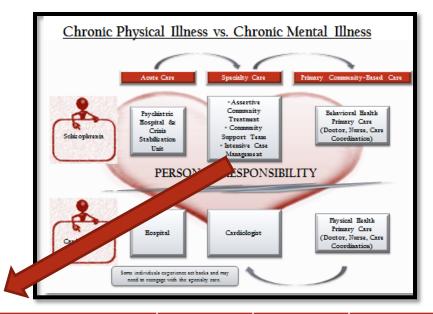
Mental Health & Wellness

- ☐ Assertive Community Treatment
- ☐ Community Support Team
- ☐ Intensive Case Management
- ☐ Case Management
- ☐ Supported Employment
- Crisis Intervention
- ☐ Screening & Assessment
- Education & Skills Training
- ☐ Medication Maintenance & Monitoring
- ☐ Individual, Family & Group Counseling
- ☐ Linkage & Referral
- ☐ Community Transition Planning
- ☐ Peer Support & Whole Health Action Management
- ☐ Community Based Rehabilitative & Recovery Supports
- ☐ Residential & Independent Housing Support
- ☐ Appalachian Integrated Mission Health
- ☐ HIV/AIDS Rapid Testing & Education

Highland Rivers Health, DOJ Services (Specialty)

The services funded through the Department of Justice
Settlement are targeted towards individuals with serious and
persistent mental illness under the
Americans with Disabilities Act.

HRH receives \$3 million and serves 3,928 under the state contract which is an average of \$764/person served.



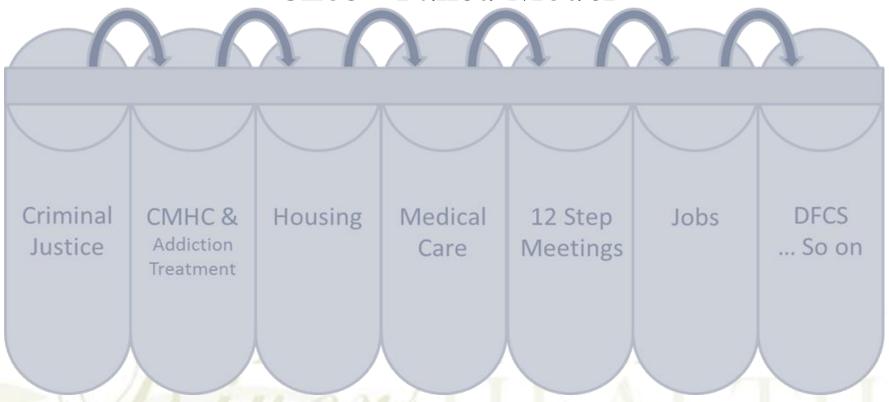
Service	Description	Date Started	Numbers Served	Cost
Assertive Community Treatment (ACT)	A client-centered, recovery oriented and highly intensive service for that utilizes a holistic approach with services provided in the community 24/7 by a multidisciplinary mental health team (Serving Floyd, Paulding, Bartow & Polk counties).	10/01/12	99	\$7,800/ person
Community Support Team (CST)	A mobile team consisting of a nurse, community support staff, and Certified Peer Specialist that provides services to individuals in their own home and ensures that community resources needed for the individual to remain in the community are in place (Serving Gilmer, Fannin & Pickens counties).	10/01/11	131	\$4,878/ person
Intensive Case Management (ICM)	Consists of environmental supports and resource coordination considered essential to assist a person with improving functioning, gaining access to necessary services, and creating an environment that promotes recovery and prevents out of home placement (Serving Gordon, Murray & Whitfield counties).	06/01/13	67	\$4,358/ person

Building a Strong System of Care



Georgia's Traditional Behavioral Primary Healthcare System

Silos = Failed Model



Traditional supports require the client to navigate complex and disjointed silos of support.

National Models of Integrated Care

- 1. Accountable Care Organizations (ACOs) Model of Service Delivery.
- 2. Primary Care Practice Medical Homes Integration of primary care and behavioral health needs available through and coordinated by the PCP.
- 3. CBHO (Community Behavioral Healthcare Organization) Health Homes/ Person-Centered Medical Homes Integration of primary care and behavioral health needs available through and coordinated by the CBHO.
- 4. Federally Qualified Health Centers (FQHCs) Integration of primary care, oral health, and behavioral health needs.
- 5. Multi Agency Health Homes Integrates medical, behavioral, social services, etc.
- 6. FQBHC? To be seen, currently being proposed in DC, with the hope to be online within 1 to 2 years.



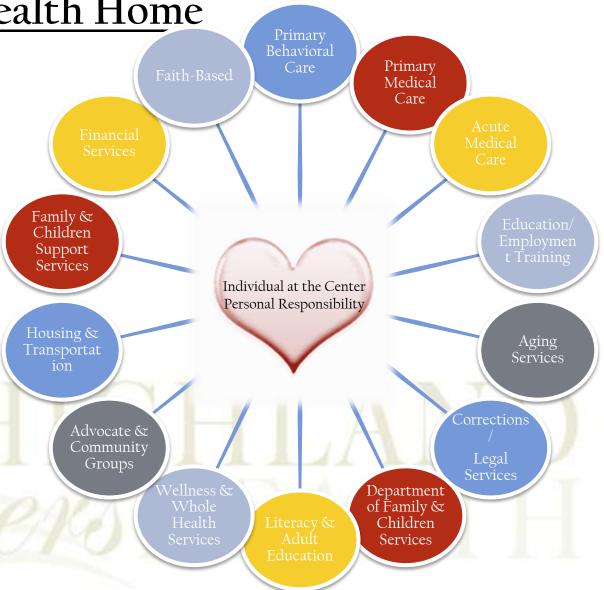






Proof of Concept,
Multi-Agency Health Home

The purpose of the Polk County Social Service Hub of Excellence is to provide high quality, easily accessible goods and services for the most in need by bringing together a variety of social service providers under one roof. The social service hub will offer a full spectrum of services from cradle through career solutions and supporting citizens to the end of life.



Proof of Concept, CBHO



Appalachian Integrated Mission Health (AIM Health) is a program focused on the whole health, wellness and recovery of individuals and communities in Northwest Georgia. Through their unique partnership, Highland Rivers Health and Georgia Mountains Health are committed to improving the health of individuals with serious mental illness who have or are at risk of physical health conditions and chronic disease.

Goals Include:

- 1. Increase access to coordinated and integrated behavioral health and primary health care services for individuals with serious mental health illness or co-occurring disorders.
- 2. Improve process and service delivery of comprehensive care.
- 3. Remove barriers to enhance the quality and reliability of equitable care.
- 4. Increase the education, awareness, and availability of resources for improving overall wellness and disease management.

Outcomes in First Year (Only baseline data has been collected, participants will be reassessed every 6 months):

- 276 Screened in 5 months of operation (60% reported never having a PCP).
- 20 were diagnosed with diabetes, 52 with Hypertension, 31 with Hyperlipidemia, and 16 with Thyroid issues (adults who have been living with undiagnosed co-morbid physical health disorders which is 43% of those screened).

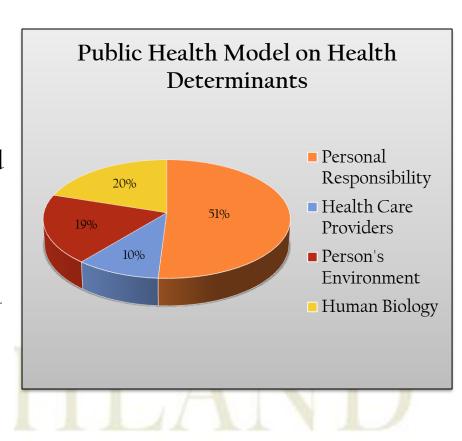






Future of Community-Based Healthcare

- 1. Migration from the traditional reimbursement system to a pay for performance health and wellness reimbursement system.
- 2. Alignment of health neighborhoods and payors to create an integrated, holistic and person-centered system of care that incentivizes healthy choices.
- 3. Proliferation of a recovery based system of care that partners with individuals and espouses ownership of one's wellness.
- 4. A more significant role of community-based primary behavioral healthcare in the overall health system.





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Questions for the Panelists



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