CT'S BEHAVIORAL HEALTH HOME INITIATIVE

Background

- Section 2703 of the Affordable Care Act
- "State Option to Provide Health Homes for [Medicaid] Enrollees with Chronic Conditions"
- Application to the Centers for Medicaid and Medicare Services (CMS) via a Medicaid State Plan Amendment
- 90% Federal match (FMAP) for the first 8 quarters (as compared to the standard 50% match)

CT's BHH Model

Using **LMHAs and their Affiliates** (Sound Community Services) as **designated providers** to implement BHH services statewide beginning October 1, 2015

CT BHH Eligibility

Mental Health Consumers with:

SPMI

Schizophrenia and Psychotic Disorders;

Mood Disorders:

Anxiety Disorders:

Obsessive Compulsive Disorder;

Post-Traumatic Stress Disorder; and

Borderline Personality Disorder.

- · Medicaid Eligibility
- Medicaid claims ≥ \$10k/year

DMHAS Funding Supports LMHA BHH Staffing

- BHH Director
- BHH Administrative Specialist
- · Hospital Care Transition Coordinator
- Peer Recovery Specialist
- BHH Specialists
- Nurse / PC Nurse Care Manager
- PC Physician Consultant

Behavioral Health Home Core Services

- · Comprehensive care management
- · Care coordination
- Health promotion
- · Comprehensive transitional care
- · Patient and family support
- Referral to community support services



CT BEHAVIORAL HEALTH HOME OUTCOMES

- GOAL 1: IMPROVE
 QUALITY BY REDUCING
 UNNECESSARY HOSPI TAL ADMISSIONS AND
 READMISSIONS
- GOAL 2: REDUCE SUBSTANCE USE
- GOAL 3: IMPROVE TRANSITIONS OF CARE
- GOAL 4: IMPROVE THE PERCENT OF INDIVIDU-ALS WITH MENTAL ILLNESS WHO RECEIVE PREVENTIVE CARE
- GOAL 5: IMPROVE CHRONIC CARE DELIVERY FOR INDIVIDUALS WITH SPMI
- Goal 6: INCREASE PER-SON-CENTEREDNESS AND SATISFACTION WITH CARE DELIVERY
- Goal 7: INCREASE CONNECTION TO RECOVERY SUPPORT SERVICES

To learn more:

Call Toll Free: 1-844-551-2736

Visit: www.ctintegratedcare.com