



BHH Designated Provider Agency Work Group

July 21, 2022

1:00pm – 3:00pm

Virtual Meeting

Population Health Initiative: Engaging with Members

1. Billing Updates

- a. BHH Medicaid Performing provider's reenrollment is coming up. Everyone has different re-enrollment dates.
 - OOC will take care of the State Operated Providers reenrollment
 - PNP providers will receive a letter from Gainwell six-months prior to the due date. The ATN # is included in the letter.
 - Complete required paperwork and submit. Approval is usually received within a few weeks of submittal.
 - Renewals are good for 3-years.
- b. FY PCP Trackers
 - Due by 07/29/2022
 - Send completed trackers to:
 - Vanessa.Oneal-Campbell@ct.gov and Ryan.Grealis@ct.gov

2. How to Engage

- a. Motivational Interviewing: Working with the individuals we serve.
- b. -Motivational Interviewing (MI) is a collaborative, person-centered, guiding method designed to elicit and strengthen motivation for change. (Miller & Rollnick, 2012)
- c. The tasks of MI are to:
 - Engage: OARS
 - Focus on what is important to the patient regarding behavior, health, and welfare.
 1. Eliciting Change Talk
 - a. Ask for elaboration and examples: Tell me more,
 - b. Look forward or backward: How do you see your health in 5 years?
 - c. Use a readiness ruler: Why are you a five and not a four?



d. Ask for pros and cons of both changing and not changing?

- Evoke the patient's personal motivation for change.
- Negotiate plans

1. Help client create a specific self-care plan

d. Motivational Interviewing Skills: OARS

- Oars includes a set of four basic communication techniques
- Ask **O**pen-ended questions.
- **A**ffirm strengths and movement in a positive direction.
- **R**eflect what the individual says to convey that you are listening and to confirm understanding.
- Summarize the interaction to bring closure, confirm mutual understanding and next steps.

e. **Stages of Change: Meeting the person "where they are"**

-People are better persuaded by the reasons they themselves discovered than those that come into the minds of others. Blaise Pascal

- **Pre-contemplation:** Unaware of behavior or need to change; not planning to make a change
- **Contemplation:** Thinking about change. Seeking out support and information
- **Preparation:** Planning to make change. Gathering confidence and resources
- **Action:** Taking positive steps to make changes and putting plans into practice
- **Maintenance:** Achieving results and behavior becomes part of daily life
 - i. Someone might be in the Action stage of change for one issue, and might be pre-contemplative for another. For example, I am not ready to quit smoking so I am pre contemplative, But I have started regular exercise program so I am in the action or maintenance phase for that.
 - ii. We are thinking of starting where the individual is and focus our activities or interventions in a way that is going to be most helpful in moving somebody through the stages.

f. BHH Services

- Creating the Treatment plan
 1. Work with the client to establish SMART goals & objectives
 2. Identify what BHH core service is being delivered
 3. Notes must identify who did what and what the responses and next steps are. They should be descriptive of each encounter and directly related to the treatment plan.

3. BHH Health Topics – Provider Comments

a. Provider 1 – Annual Screenings



- CRMHC Adults 50-64; Increase by 40% follow through with regular H&P and cancer screenings
- b. Provider 2 – Metabolic Syndrome
 - CMHA: We have already been working on this health topic and based on our population, are able to dive a little deeper.
- c. Provider 3 – Diabetes
 - SMHA: Population has higher risk for diabetes related to medication, lack of activity, and unhealthy eating habits.
- d. Provider 4 - Nicotine Use Disorder
 - BHcare: Target population of our health initiative on this project will be focused on those with tobacco use disorder. Currently we run a tobacco cessation group. We are looking at areas of improvement to curriculum. Looking at those barriers to engagement, getting those clients aboard and retention rates as well.

4. Health Initiative Timeline Review

Next Steps

Task	Deadline
Identify Population- send to Katharine and Denise	07/19
Written overview of Your Pop Health project – send to Katharine and Denise	08/31
Staff Roles, how will you engage with clients, what materials will you need?	
Review and ask questions on Pop Health project. Prepare for implementation.	September provider calls
Agencies present on their Pop Health Initiatives	October BHH Workgroup meeting

5. Provider Feedback & Questions

6. Follow-up

- a. Jeannie to see if male/female field can be put onto certain data reports
- b. All ASO available for data and incentive consultation.



Participant List

Name	Agency
Denise Perez	ABH
Paul Zakarian	ABH
Ginny Murdoch	ABH
Zach Kelley	Beacon Health Options
Jeannie Wigglesworth	Beacon Health Options
Anthony Lawson	BHcare
Justine Compton	Bridges
Valerie Mallard	Bridges
Matias Cordal	Bridges
Moneeva Jarvis	Bridges
Nicole Ware	Bridges
Nikisha Gilliam	Bridges
Robert Kinney CPS (Rkinney)	Bridges
Patricia Bennett	Bridges
Jason Boucher	CHR
Ed Ford	CMHA
Karolina Dudzik	CMHC
Velvet Yusko	CMHC
Susan Swonson-Liso	CMHC
Ellen Severn	CRMHC
Katharine Willis	DMHAS
Lauren Staiger	DMHAS
Heta Desai	DMHAS
Ryan Grealis	DMHAS
Alicia Reid Sterling	InterCommunity
Kimberly Whipple	Rushford
Ann Ntate	RVS
Jesus Silva	SMHA
Lisa Goyette	SMHA
Alix O'Neil	Sound
Ambar Negron	Sound
Natalie Crino	Sound
Tyischa Mcintear	Sound
Victoria Hoey	SWCMHS
Shellina Taylor	SWCMHS
Joe Trzaska	SWCMHS
Isabel Barrett	United Services
Krystin Tetreault	United Services
Daly Cruz	United Services



Amber Phillips	United Services
Rebecca Hutchinson	United Services
Kimberly Solomakos	United Services
Kaitlyn Butler	United Services
Melissa Abrams	United Services
Jennifer	United Services
David Horowitz	United Services
Kaitlyn Hankins	
Richard Albert	
Wendy Burrows-Gardino	