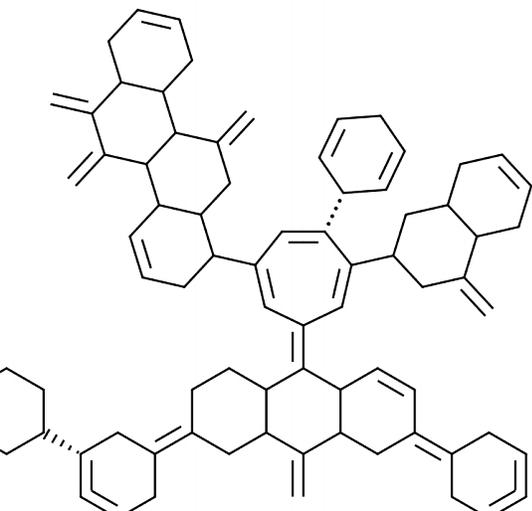




Enhancing Behavioral Health Interventions in Primary Care



**Quality Improvement
Organizations**
Sharing Knowledge. Improving Health Care.
CENTERS FOR MEDICARE & MEDICAID SERVICES

atom
Alliance for Powerful Change™

atom Alliance recognizes the challenges that primary care practices and inpatient psychiatric facilities (IPFs) face in the effort to integrate behavioral healthcare in the primary care setting and improve the care transitions of patients following a psychiatric hospitalization. In an effort to bring best practices, industry expertise, and overall value to our partners, atom Alliance has subcontracted with key organizations —Cherokee Health Systems (CHS) and Medical Decision Logic, Inc.© (mdlogix) — to assist in developing and implementing effective interventions. They will play key roles in our success in this endeavor to improve quality and transitions in care.

Key Strategies

Primary Care Practices

Once recruited, atom Alliance will work with primary care practices in the following ways:

1. Assess

Practice Readiness Assessment: The Alliance will develop and implement a brief readiness assessment to assist in understanding each practice's current readiness for intervention. CHS will work with the Alliance to match each practice with the tools and support that are most likely to take them from where they are to where they need to go. This assessment will be offered in a variety of ways (i.e. a phone interview, hard copy questionnaire, online surveys) to allow practices to select the approach best suited to their needs.



2. Onboard

Onboarding Assessment: Once recruited, the Alliance will conduct an onboarding assessment of the practices' current processes and existing workflows. Understanding and addressing the impact of screening on the practice workflow will be a critical element to practices' success.



3. Make the Business Case

Smarter Spending-The Clinical Case IS the Business Case: Ultimately, the "business case" for screening is also a "clinical case." Practices are increasingly paid for quality of care or are moving in this direction. The Alliance will assist practices in addressing the psychosocial factors (such as depression and substance abuse) to help them perform better and enhance their reimbursements.



4. Train/Communicate

 **Format:** The Alliance will tailor training materials to meet the practical demands of primary care. An array of informational educational material formats will be offered including tip sheets, laminated pocket guides, coaching calls, electronic easy reference guides, pre-written scripts for talking with patients, brief podcasts and formal didactic training. The Alliance will also create and share a behavioral health training resource manual.



 **Content:** Training will cover basic elements of diagnoses and intervention with depression and alcohol misuse. Training and coaching for practices who want to embed behavioral health within their practices will also be provided.

 **Audience:** Any and all practice staff involved in direct patient contact will be included and encouraged to participate in the training. Broader engagement of practice staff including nurses will increase the likelihood of initial and long-term success.

 **Access:** The Alliance will offer practices an opportunity to attend trainings after hours and/or access training via on demand webinars. Offering this level of access to training programs is designed to meet the demands of many primary care practices who cannot close shop for any period of time without significant revenue loss. Hosting call-in hours for questions that emerge in the course of integrating screening into a practice workflow can also help address questions in a timely manner.

5. Transform Practice

 **Implementation:** The Alliance will assist each practice with identification and implementation of screening tools adapted to the specific needs, values and preferences of each practice. Where screening tools have already been adopted, the Alliance will assist practices in optimizing their value.

 **Strengthening Referral Sources:** The Alliance will assist practices by providing a variety of approaches and strategies to support follow-up for depression and substance abuse treatment. This may include assistance with building partnerships and/or implementing operational processes and procedures for identifying, communicating with and accessing referral sources.

 **Ongoing Communication:** Email and other electronic dialogue will be the key tools used to provide technical assistance and education to primary care providers post-recruitment. Onsite technical assistance will be conducted only as required to efficiently manage resources.

6. Analyze Performance

NCC Analytics: The Alliance will provide analytics from the National Coordination Center for project feedback and performance monitoring, supplemented, where applicable, with use of BH-Works™ reporting as a real-time practice performance tracking tool.

7. Sustain

Long-term Adoption: The Alliance will seek to optimize the long-term adoption of screening for depression and alcohol misuse through a variety of mechanisms including collaboration with change agents, provision of training and support in bite-size portions that fit the pace of primary care (e.g. coaching calls, podcasts, and email support). To draw toward sustainability and growth, the Alliance will approach the integration of behavioral health screening as one element of a larger effort to support primary care practice transformation versus developing a siloed program.



Practice Infrastructure

The Alliance will build an infrastructure of support for practices. This infrastructure includes the following:

1. Developing Allies

Relationships with Primary Care Associations (PCAs) and other regional setting-related partners with connections and influence with practices will be sought, developed and leveraged.

2. Tracking Wins and Failing Forward

The Alliance will implement mechanisms to track, document and understand lessons learned, ways to mitigate challenges and wins along the way. These elements will be contributed to the larger Quality Innovation Network-Quality Improvement Organizations (QIN-QIO) and Centers for Medicare & Medicaid Services (CMS) body of knowledge around behavioral health.

3. Providing Tools and Resources

In addition to working with recruited providers and practitioners, the Alliance will provide tools and resources to non-recruited entities through the atom Alliance website, the atom Alliance web portal—Providers.Exchange—and other electronic tools.

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