

CBH Leading the Way In Cross Systems Integration

Donna E.M. Bailey and Katie Dunphy

Abstract

Community Behavioral Health (CBH) is a non-profit 501c (3) corporation contracted by the City of Philadelphia to manage the delivery of behavioral health services for Medicaid recipients of Philadelphia County. CBH believes that integration of care is, at its essence, a person-centered approach to care that considers not only the individual's precipitating need but also the social determinants of health that impact on the individual or family. To achieve this, coordination, across systems and service providers, is critical. This will review the various systems level partnerships that we have achieved in Philadelphia, why integrated care is a preferable model and what some of the key ingredients to a strong partnership include.

Philadelphia is the poorest big city in the United States. We know that poverty is linked directly with the Social Determinants of Health (SDOH). Statistically, those who experience serious mental illness also experience poor health outcomes. Historically, the systems intended to serve Philadelphians have been fractured, resulting in poorly coordinated services and care targeting a singular issue or symptom. Those seeking services have been left to navigate our large, complex, and cumbersome service delivery systems. These individuals are often experiencing multiple SDOH challenges and therefore dealing with multiple service delivery systems, in addition to the layer of stigma related to behavioral health. This fragmented approach also contributed to higher costs associated with care. In this context, shifting to a holistic approach to care, reducing barriers, and increasing the accessibility of behavioral health services while creating cost efficiencies becomes the blueprint for an integrated behavioral health system in Philadelphia and integration across systems. In short, partnerships are critical.

In 1997, as part of the newly established HealthChoices program, the Commonwealth of Pennsylvania "carved out" behavioral health services for Medicaid recipients to assure member access to services, improve quality of care, and stabilize costs. At the time, most counties turned to privately managed care companies to oversee the Behavioral HealthChoices program.

However, Philadelphia chose a bold new option: to become one of the nation's first cities to successfully launch its own non-profit behavioral health managed care organization for Medicaid recipients: Community Behavioral Health (CBH). CBH is a non-profit 501(c)(3) corporation contracted by the City of Philadelphia to manage the delivery of behavioral health services for Medicaid recipients of Philadelphia County. Through its network of contracted behavioral health provider agencies, CBH served over 116,000 Philadelphians in 2019. Over 735,000 Philadelphians were eligible for Medicaid, roughly half of the City's population.

CBH is dedicated to supporting Philadelphia's individuals, children, and families within the communities where they live, learn, work, and gather. CBH works with a multitude of public system partners, including the Philadelphia Department of Human Services (DHS), DHS' child welfare Community Umbrella Agencies (CUAs), the School District of Philadelphia, the Office of Homeless Services, the First Judicial District, and Physical Health Managed Care Organizations (PH-MCOs). CBH's board structure, by design, includes the commissioners of the City's social services systems' partners in order to create synergy among these distinct systems, approach individuals from a holistic perspective, decrease barriers across systems, and yield better outcomes for individuals and families. Integration of care is, at its essence, a person-centered approach to care that considers the individual's or family's precipitating needs as well as the social determinants of health that impact them. To achieve this, coordination across systems and service providers is critical. Underpinning these transformative efforts is data collection to evaluate performance, clinical, and quality efficacy, as well as cost efficiencies. CBH has direct involvement in multiple large integrated initiatives, as described below:

Education

Schools are one of the most influential natural contexts for children; unmet psychosocial needs can significantly impact their ability to learn. Education and behavioral health partnership are vital to children's success in a school setting. CBH recently moved towards a regionalized approach to treatment service delivery, which allows for appropriate concentration of expertise and resources; enhanced sensitivity to community needs; and greater efficiency, coordination, and continuity of care for children.

Behavioral Health in Schools

- ▶ Support Team for Education Partnership (STEP) is provided in 21 Philadelphia public schools and 1 charter school
- ▶ Intensive Behavioral Health Services (IBHS) provided by 27 providers in home, school, and community-based settings



Child Welfare

CBH has staff co-located at Family Court, Philadelphia DHS, and the CUAs to support youth and families involved in the child welfare system with access to assessment and treatment services.

Cross-System City Partnerships

- ▶ 18 CBH staff members co-located at Philadelphia Family Court
- ▶ 7 CBH staff members assigned to CUA/co-located at Philadelphia Family Court
- ▶ 4 CBH staff members co-located at Philadelphia DHS



Physical Health and Behavioral Health Integration

The Community-Based Care Management (CBCM) teams coordinate with Primary Care Practice (PCP) teams and provide consultation services to improve individuals' quality of health, thereby reducing both the utilization of high-cost health care services and the overall health care cost per member per year.

Behavioral Health Consultants (BHCs) in Federally Qualified Health Centers (FQHCs)

CBH supports the model of embedding licensed BHCs in FQHC primary care settings, evidence-based interventions to improve individuals' physical and behavioral health outcomes and provide support and education to the primary care teams.

Integrated Care Program (ICP)

ICPs consist of a collaborative effort between behavioral and physical health managed care to reduce emergency room utilization, reduce inpatient physical and psychiatric admission and readmission, increase the percentage of members who stay adherent to antipsychotic medication regimen for at least 80 percent of their treatment period, and increase initiation and engagement rates of alcohol and other substance dependence treatment.

The models that have been implemented in Philadelphia are unique within the local landscape and by nature of the large systems partners with which we are engaging. This integrated care model is preferable for three reasons:

1. increasing access by reducing barriers to service,
2. improving quality of care and outcomes for individuals, and
3. containing costs and resources among partners.



PH-BH Integrated Care Teams

- ▶ 14 staff members dedicated to integrated care teams
- ▶ 6 health insurance counselors in health centers

The infographic features a purple background with a grid of white hexagons containing various medical icons (heart, stethoscope, pill, microscope, etc.). In the background, there is a blurred image of two people, one with curly hair, looking at a device.

While partnerships are essential, there is an art to braiding or integrating different funding streams. Medicaid dollars are prescriptive in the services they can support; however, CBH has a

proven track record of working with state partners to develop new mechanisms for service delivery that conform to Medicaid requirements and offer innovative solutions to the funding stream mix. It is critical that each system partner be clear about their respective funding resources and any associated restrictions. A shared vision, transparency, and commitment from the leadership of the partners are all critical elements in shaping the success of the initiative in a mutually beneficial way.

CBH considers the coordinated and integrated delivery of physical and behavioral health care essential to whole-person care. While there is still work to be done, we believe that bringing partners together with the intent of decreasing barriers to access and increasing the quality of services for Philadelphians will result in better long-term health outcomes.