

Section:	Policy Name:		Policy Number:
Clinical Practices	Integrated Healthcare		12.02
Owner:	Reviewed By:		Total Pages:
Director of Clinical Quality	Alena Lacey, MA, LPC and		4
	Jeannette Bayyapune		
Required By:	Final Approval By:		Date Approved:
☐ BBA ☐ MDHHS ☐ NCQA	Alena Lacey		
☑ Other (please specify):	V		Mar 3, 2023
PIHP Contract Section 8.3.2.1,	Jeannette Bayy Jeannette Bayyapuneedi (Mar 3,	Wai 5, 2025	
P 7.3.1	Jeannette Bayyapuneedi (Mar 3, 2	2023 14:07 EST)	
Application:	Line of Business:		Effective Date:
☑ SWMBH Staff/Ops	☐ Medicaid	☑ Other (please specify):	6/9/2020
☑ Participant CMHSPs	⊠ Healthy Michigan	1115 Wavier	
⊠ SUD Providers	SUD Block Grant		
☑ MH/IDD Providers	図 SUD Medicaid		
☐ Other (please specify):	☐ MI Health Link		

Policv:

It shall be the policy of Southwest Michigan Behavioral Health (SWMBH) to provide Integrated Healthcare services which meet the contractual and regulatory requirements of the Michigan Department of Health and Human Services (MDHHS) contract and Center for Medicare and Medicaid Services (CMS) Code of Federal Regulations (CFR) and advances the recovery of Region 4 customers. This will be accomplished by collaborating with Medicaid Health Plans (MHP), Community Mental Health Service Providers (CMHSPs), Primary Care Providers (PCP) and other providers as needed.

Purpose:

The purpose of SWMBH's Integrated Healthcare program is to assist in improving member health outcomes, improve functional capacity, and support self-management by eliminating barriers and providing care coordination between behavioral and physical health providers while promoting patient centered care. Goals for Integrated Care include but are not limited to reducing high emergency department (ED) use and inpatient (IP) admissions for members identified as high risk in compliance with the MDHHS 1915 Waiver Program contract requirements. In addition, Integrated Care aims to eliminate duplication of services and reduce healthcare costs while encouraging use of appropriate services in the behavioral health system. SWMBH's Integrated Care team also supports SWMBH's overall metrics which reflect things like improved care or access for members.

Scope:

SWMBH's Integrated Care Specialists are responsible for this policy.



Responsibilities

Integrated Care Specialists will establish tasks and roles based on contracts and regulations.

Integrated Care Specialists will work with MHPs to organize and perform Integrated Care Team meetings with a focus of improving health outcomes and lowering ED and IP utilization.

Definitions:

Interdisciplinary Care Team (ICT) - Are healthcare professionals from different professional disciplines and entities who collaborate, either in person or through other means, with the member to develop and implement a plan of care that meets the individuals medical, behavioral health, long-term care services and supports, and social needs.

Integrated Care - The integration of physical healthcare, mental healthcare, and substance use disorder treatment, which is facilitated by an Integrated Care Team. The goal of Integrated Care is to maximize functional capacity and self-management by optimizing the overall health and well-being of members, while avoiding duplication of services and reducing healthcare costs.

Integrated Care Team: The Integrated Care Team may include staff from, but is not limited to SWMBH, MHP, CMH and PCP staff participating in monthly care coordination with a shared goal of personcentered planning toward improved health outcomes. Accommodations will be made to include a member as part of their own interdisciplinary care team meeting upon request or will be facilitated as needed to improve an individual's health outcomes.

Care Coordination - A process used by a person or Integrated Care Team to assist beneficiaries in gaining access to available Medicare, Medicaid, and waiver services, as well as social, educational, and other support services, regardless of the funding source for the services.

Community Support Services - Services that promote disease management, wellness, and independent living, and that help avert unnecessary medical interventions (e.g., avoidable or preventable emergency department visits and facility admissions).

Standards and Guidelines:

- A. SWMBH and participant CMHSPs will work to eliminate barriers to communication and coordination of care between Substance Use Disorder providers and other providers. SWMBH and providers will work together in an attempt to obtain the signed State of Michigan form 5515 for interdisciplinary care team members.
- B. SWMBH staff (including RN/ Licensed Therapist, Care Manger II and/or Care Manager I), will coordinate with the appropriate provider including but not limited to participant CMHSP's Case Managers, Licensed Therapists, RNs, PCP or Recovery Coaches to coordinate members' care by improved communication to all current and recent providers, identifying barriers, connecting members to community resources and avoiding duplication of services.



- C. CMHSP staff will assist the SWMBH Integrated Care Team by providing member updates, and information about community support services (CSS) or by facilitating access to services by ICT members.
- D. SWMBH staff are jointly (along with MHP staff) responsible for ICT meeting preparation and conduct. SWMBH staff will facilitate ICT meetings with a proactive approach to integrated care and when applicable, patient centered planning.
- E. SWMBH staff will attend the PIHP-MHP workgroup meetings and follow directives agreed upon by the workgroup to the extent that they are aligned with SWMBH policies and mission statement. ICT staff will work toward a resolution of differences between MHP and the workgroup and seek to clarify differentiation between workgroup suggestions and State mandated activities.
- F. All ICT activities will adhere to CFR 42, Part 2, Michigan Mental Health Code, and HIPAA, and will aim to direct coordinated care utilizing best practices, and as directed by the SWMBH P12.2.1 ICT Procedure, and other SWMBH policy as applicable.

Effectiveness Criteria:

SWMBH will use metrics established in the contract to measure effectiveness.

In addition, SWMBH will analyze ED and IP utilization pre-ICT meetings, during ICT meetings and post-ICT meetings.

References:

- A. SWMBH P12.2.1 ICT Procedure
- B. SWMBH 19.2 Protected Health Information Authority and Responsibility of Individual Staff
- C. Michigan Mental Health Code
- D. HIPAA
- E. 42CFR, Part 2

Attachments:

A. State of Michigan Consent to Share Behavioral Health Information (form 5515)



Revision History

Revision #	Revision Date	Revision Location	Revision Summary	Revisor
Initial	08/28/2017	N/A: New Template	N/A: New Template	
1	9/4/2020	Formatted Integrated Collaborative Care to New Template; added Scope and Responsibilities	Annual Review	Moira Kean Doug Stewart Sarah Green
2	9/23/2022		Annual review	Jeannette Bayyapuneedi

12.02 Integrated Healthcare

Final Audit Report 2023-03-03

Created: 2023-03-03

By: Megan O'Dea (megan.odea@swmbh.org)

Status: Signed

Transaction ID: CBJCHBCAABAA0iFWzlazwuUt9mxoO19W4lwFM9Q4u3le

"12.02 Integrated Healthcare" History

- Document created by Megan O'Dea (megan.odea@swmbh.org) 2023-03-03 3:02:47 PM GMT
- Document emailed to Alena Lacey (alena.lacey@swmbh.org) for signature 2023-03-03 3:03:25 PM GMT
- Email viewed by Alena Lacey (alena.lacey@swmbh.org)
 2023-03-03 6:37:44 PM GMT
- Document e-signed by Alena Lacey (alena.lacey@swmbh.org)
 Signature Date: 2023-03-03 6:37:50 PM GMT Time Source: server
- Document emailed to jeannette.b@swmbh.org for signature 2023-03-03 6:37:51 PM GMT
- Email viewed by jeannette.b@swmbh.org 2023-03-03 7:07:28 PM GMT
- Signer jeannette.b@swmbh.org entered name at signing as Jeannette Bayyapuneedi 2023-03-03 7:07:48 PM GMT
- Document e-signed by Jeannette Bayyapuneedi (jeannette.b@swmbh.org)
 Signature Date: 2023-03-03 7:07:50 PM GMT Time Source: server
- Agreement completed. 2023-03-03 - 7:07:50 PM GMT