



Illinois Department of Healthcare and Family Services Behavioral and Mental Health Subcommittee Meeting

Date: Tuesday, April 20, 2010

Time: 12 noon CDT – 1:00

Teleconferencing #: 1-877-684-9625 passcode 102953

Agenda

- A. Department of Mental Health (DMH) Update—Caryn Jacobi/Felicia Vertin –
- Felicia and Caryn expressed their strong appreciation for the collaborative relationships w/ Regions 1 & 2;
 - Regions 3, 4, 5 are in process (Jordan Litvak and Jim Novelli are our key contacts). There was an excellent turnout at a recent provider meeting to learn about YHP collaboration. Sites are using the DM flag in MEDi to see which members are eligible for YHP.
 - A Success Story: Behavioral Health Nurse noted a member was getting PCP services at Rush and BH services at Mile Square. She was able to facilitate appointments in order to more optimally address the issues of drinking and drugging that were exacerbating the patient's psychiatric symptoms. After a brief stay followed by attending appointments with her and YHP care coordination, the patient has avoided hospitalization since September and is now going back to her own apartment to live.
 - A Success story: Piatt County—a patient being seen by psych was diagnosed with a blood clot that distracted from psychiatric goals; YHP facilitated care for blood clot, got member medically cleared to resume work on BH issues.
 - Jordan Litvak commented that working with Felicia Vertin has been excellent. She's been very responsive. Uncertainty about the YHP program was interfering with collaboration at Christian County. Felicia then explained the YHP program and a good working relationship has since evolved. Felicia also went to MH Centers of Central IL and conveyed information very effectively. Jordan Litvak stated that the MEDi screen shot will be incorporated there as well and Jordan will disseminate that screen shot to his regional providers; good work on integrating MH needs with Medical needs.
- B. Department of Alcohol and Substance Abuse (DASA) Update—Caryn Jacobi/Felicia Vertin
- Continuing to work with Rick Nance, etc at DASA
 - Had a gathering of MISA providers toward end of Jan with 22 providers in attendance. Now following up with those individuals to develop collaborative relationships.
 - Collaboration has gone very well with those sites that have dual services for both DMH and DASA
- C. Depression Metrics—Kathleen Warnick –
- Kathleen reminded the group of the depression quality metrics YHP is now tracking. Two depression metrics were added based on HEDIS definitions for acute and chronic phase management for a person with new index diagnosis of depression. These are now included in profiles for PCPs and can look at progress compared to statewide avg. Profiles are mailed quarterly to PCPs and are available on MEDi.

D. Social Worker Emergency Department Pilot—Leslie Ford

- Started with this new initiative in October 2009 for patients that use the ED excessively. Eligible individuals include those with asthma, COPD and CHF. They have many behavioral health comorbidities. The social worker's role is to connect with staff at high-volume hospitals so that she can identify and engage with YHP patients seen in those locations for these conditions and enhance coordination with the medical home.

E. CMT Pharmacy Data and pharmacy patient assignment errors –Dr. Carrie Nelson

- CMT decision support mailings have a high volume of return responses that indicate that the patient involved is not a patient of the physician receiving the message. It was reinforced that providers must notify pharmacies on such occasions since many of these are pharmacy errors. HFS has started to take this to the next level when a provider sees the pt for a visit and bills for that visit but replies that this is “not my patient”.

F. Psychiatric Hospitalists

- In reference to a presentation given at a psychiatric conference that indicated episodes of violence could be dramatically decreased by the presence of a psychiatric hospitalist. An open discussion took place. Peter Alahi responded that there are locations in IL in which this model is in place. Jordan Litvak described familiarity with the model as well. St. Francis in Peoria has such a model and Lincoln BH Center (kids/adolescents) hires their own doctors to provide services. The model works well depending on the doctor that you get. Some problems also include 24/7 coverage with just one doctor. Marilyn from Children's reported that one child/adolescent psych sees pts M-F then outpatient psychiatrists rotate coverage by phone. She finds that consistency is more optimal M-F.

G. CMT Clinical Calls Follow-up

- CMT has held a psychotic prescribing call and opiate prescribing call. Further discussion topics for the future were requested. It was acknowledged that most pts do not see a psychiatrist and instead get their psychiatric care from PCPs. These calls are planned to target the PCP audience primarily. It was requested that if subcommittee members know of clinicians who would be good presenters, please help identify them. It was requested that YHP first identify topic areas then can find the speakers.

H. Open Discussion

- Meryl Sosa (IPS) asked what YHP was doing regarding nursing home psychiatric medication prescribing. Mary Miller (HFS) responded by detailing the Long Term Care Task Force work. There are ~11,000 YHP patients in LTC. At high volume sites an APN nurse has been co-located (~35 sites). She works with patients, staff, reviews records, med lists, clinical measures and coordinates with providers to optimize care. YHP pharmacists also look at LTC patients who have frequent of inpatient admissions and complete a medication review then message to providers. In addition monthly messaging from CMT goes to prescribers who care for pts both in LTC and outpatient. The NH task force has been looking at psych prescribing for pts in LTC—Randy Malan from DMH and Mary Miller sit on this task force and are evaluating what could be tracked with claims data to provide decision support on identified issues.
- Vince Keenan (IAFP) reported that he and Harry Lawson with the Illinois Osteopathic Association both sit on medication prescribing task force and that electronic prescribing for schedule 2 drugs in process. This should significantly decrease pharmacy errors.

I. **Next Meeting July 20, 2010 Noon CDT-1:00 pm**