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# **Improving Behavioral Health Follow-up Care Learning Collaborative: Affinity Group Q&A**

**June 15, 2021**

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Deirdra Stockmann, Centers for Medicare & Medicaid Services (CMS)

Michaela Vine, Mathematica

Mira Wang, Mathematica

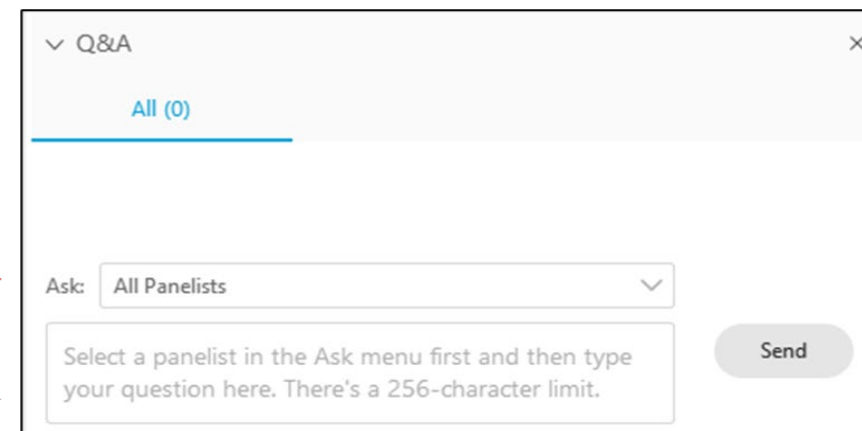


# How to Submit a Question

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- To submit a question or comment, click the Q&A window and select “All Panelists” in the “Ask” menu
- Type your question in the text box and click “Send”
- Only the presentation team will be able to see your questions and comments

- **For technical questions, select “Host” in the “Ask” menu**



A screenshot of a Q&A interface. At the top, there is a dropdown menu labeled 'Q&A' with a downward arrow and a close button 'X'. Below it, the text 'All (0)' is displayed. A horizontal line separates the header from the main content area. In the main area, there is a dropdown menu labeled 'Ask:' with 'All Panelists' selected and a downward arrow. Below this is a text input field with the placeholder text: 'Select a panelist in the Ask menu first and then type your question here. There's a 256-character limit.' To the right of the text box is a rounded rectangular button labeled 'Send'. Two red arrows point from the text in the list above to the 'Ask:' dropdown and the text box.



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# Agenda

Topic	Speaker(s)
Welcome from the Centers for Medicare & Medicaid Services (CMS)	Deirdra Stockmann, CMS
Overview of the Improving Behavioral Health Follow-up Care Affinity Group & Completing the Expression of Interest (EOI) Form	Michaela Vine, Mathematica
Announcements and Next Steps	Mira Wang, Mathematica
Questions and Discussion	Michaela Vine, Mathematica

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# Welcome from CMS

Deirdra Stockmann, CMS

# Improving Behavioral Health Follow-up Care Learning Collaborative

- **The Centers for Medicare & Medicaid Services (CMS) launched the Improving Behavioral Health Follow-up Care Learning Collaborative in May 2021**
- **State Medicaid and behavioral health agencies and their partners will have an opportunity to:**
  - Expand their knowledge of evidence-based interventions to improve access to behavioral health follow-up care
  - Develop, implement, and assess a data-driven quality improvement project
  - Network with peers
  - Advance their knowledge of and skills in quality improvement

# Improving Behavioral Health Follow-up Care Learning Collaborative (continued)

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- **Webinar series**

- Webinar 1: Expanding and Ensuring Access to Behavioral Health Follow-up Care (held on May 17, 2021; recording, transcript, and slides available on the [Medicaid.gov Improving Behavioral Health Follow-up Care Learning Collaborative Homepage](#))
- Webinar 2: Leveraging Key Relationships in Improving Behavioral Health Follow-up Care (June 29, 2021 at 12:00 PM ET)
- Webinar 3: Using Data to Improve Access to Behavioral Health Follow-up Care (July 15, 2021 at 3:00 PM ET)

- **Affinity Group**

- Action-oriented support to state Medicaid, behavioral health agencies, and their partners
- Opportunity for states to increase access to timely behavioral health follow-up care among Medicaid and CHIP beneficiaries
- Will hold a workshop for state team leads in August 2021 followed by a full affinity group meeting in September 2021 (more information provided in the [Improving Behavioral Health Follow-up Care Affinity Group Fact Sheet](#))

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# Overview of the Improving Behavioral Health Follow-up Care Affinity Group

Michaela Vine, Mathematica

# Improving Behavioral Health Follow-up Care Affinity Group: Activities

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**As part of the affinity group, state teams will:**

- **Meet virtually, on a monthly basis**, for workshops and/or one-on-one state coaching calls, learning from QI advisors, SMEs, and peers
- **Develop partnerships** between state Medicaid, CHIP, behavioral health agencies, health systems, and other QI partners
- **Develop and implement QI projects** to ensure timely identification and follow through for beneficiaries requiring follow-up after hospitalization or ED visit for a behavioral health condition
- **Improve capacity to link or share data** across providers and health care settings to drive improvement in care coordination
- **Identify effective approaches** to providing follow-up care to implement in their state



# Year 1 Curriculum and Activities

- Meetings (approximately 2 meetings/month)

- Workshops

- QI Science
- SME
- Peer learning
- Monthly

- 1:1 TA calls

- QI advisor led
- State determined agenda
- Every other month

- Coaching Hours

- Active work sessions with peers
- Peer learning
- Every other month

- Newsletters, worksheets, references

- QI mailbox

- Note: AG curriculum will be adapted to meet states' needs

Medicaid & CHIP  
Health Care Quality Measurement & Improvement

IMPROVING BEHAVIORAL HEALTH FOLLOW-UP CARE  
AFFINITY GROUP CURRICULUM, REVISED 5/26/21

Month and Year (tentative)	Title	Workshop Coaching Hour	1:1 State Call	Topics and Objectives	Preparation	Follow Up	Resources
Sept 2021	Welcome & Orientation and WS #1 (with 20 min optional post-WS network time)	X		<ul style="list-style-type: none"> <li>• Call to Action—why important to work on this now</li> <li>• Overview of the Model for Improvement (Identifying project aims, measures (lead and lag), and changes)</li> <li>• Identifying and executing small tests of change using PDSA cycles: conveying idea of a simple test with a partner or stakeholder</li> <li>• Stakeholder partnerships 60-day reminder</li> </ul>	<ul style="list-style-type: none"> <li>• Review MAC QI Open School:                             <ul style="list-style-type: none"> <li>• QI 102: How to Improve with the MFI</li> <li>• QI 105: Leading QI</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Work with a mesosystem partner to test a change</li> <li>• Finalize aim statement</li> <li>• Begin organizing data sources with partners</li> <li>• Plan how to collect equity data</li> </ul>	<ul style="list-style-type: none"> <li>• MFI Overview</li> <li>• Open School QI 101</li> <li>• PDSA Worksheet</li> <li>• Stakeholder Worksheet</li> <li>• 60-day planner</li> </ul>
Sept 2021	Coaching Hour #1 (Working Session)		X	<ul style="list-style-type: none"> <li>• Review state project aims: (fishbowl exercise) followed by team break outs to work on aim and share</li> <li>• Identify available Core Set and Health Home baseline data to inform aim goal/lag measure and identify other data needs (e.g., stratification)</li> </ul>	<ul style="list-style-type: none"> <li>• Complete Stakeholder Worksheet</li> <li>• Begin work on 60-day planner</li> <li>• Begin to identify your family of measures</li> </ul>	<ul style="list-style-type: none"> <li>• Assemble data</li> <li>• Bring data to TA Call</li> <li>• MAC QI Open School                             <ul style="list-style-type: none"> <li>• QI 102, Lesson 3: Choosing a Family of Measures</li> </ul> </li> <li>• Meet or set date to meet with mesosystem partners</li> </ul>	<ul style="list-style-type: none"> <li>• Measurement Strategy worksheet</li> </ul>

Medicaid & CHIP  
Health Care Quality Measurement & Improvement

IMPROVING BEHAVIORAL HEALTH FOLLOW-UP CARE  
AFFINITY GROUP CURRICULUM, REVISED 5/26/21

Month and Year (tentative)	Title	Workshop Coaching Hour	1:1 State Call	Topics and Objectives	Preparation	Follow Up	Resources
Aug 2021	Pre-launch			<ul style="list-style-type: none"> <li>• Complete Welcome Packet worksheets</li> <li>• Identify managed care plan (MCP) performance improvement projects (PIPs), other MCP behavioral health QI efforts, and other relevant state initiatives (e.g., other BH learning collaboratives)</li> <li>• Review baseline BH and HH data and identify disparities (e.g., by race/ethnicity, language, geography) and groups who will benefit the most.</li> </ul>	<ul style="list-style-type: none"> <li>• Assemble ideas of team members in agency, across agencies, and key stakeholders and community partners</li> </ul>	<ul style="list-style-type: none"> <li>• Welcome Packet</li> </ul>	<ul style="list-style-type: none"> <li>• State monthly report</li> </ul>
Aug 2021	MAC Leadership WS (60 minutes)	X		<ul style="list-style-type: none"> <li>• State affinity group leader introductions</li> <li>• Project vision, set up and management (operational)</li> <li>• Understanding system and environment (context and components of BH and HH)</li> <li>• Introduction to the DD and key Medicaid change ideas from change package</li> <li>• Stakeholder partnerships</li> <li>• Working with dashboards</li> <li>• Begin a design and execution strategy plan for testing and learning with 60-day plan</li> </ul>	<ul style="list-style-type: none"> <li>• Optional: Review MAC QI Open School:                             <ul style="list-style-type: none"> <li>• QI 105: Leading QI</li> <li>• L101: Introduction to Health Care Leadership</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Finalize project vision statement for stakeholder audience</li> <li>• Design structure for project, subteams, role of partners, core state team</li> <li>• Identify MCP, advocacy group, and provider stakeholders, Health Homes, PCMHs (Who else is working on BH care in your state?)</li> <li>• Identify infrastructure to meet with stakeholders, engage them in vision, hear their input</li> <li>• Optional: Review MAC QI Open School                             <ul style="list-style-type: none"> <li>• QI 105: Leading QI</li> <li>• L101: Introduction to Health Care Leadership</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Open School courses</li> <li>• BH DDs</li> <li>• 60-day planner</li> </ul>

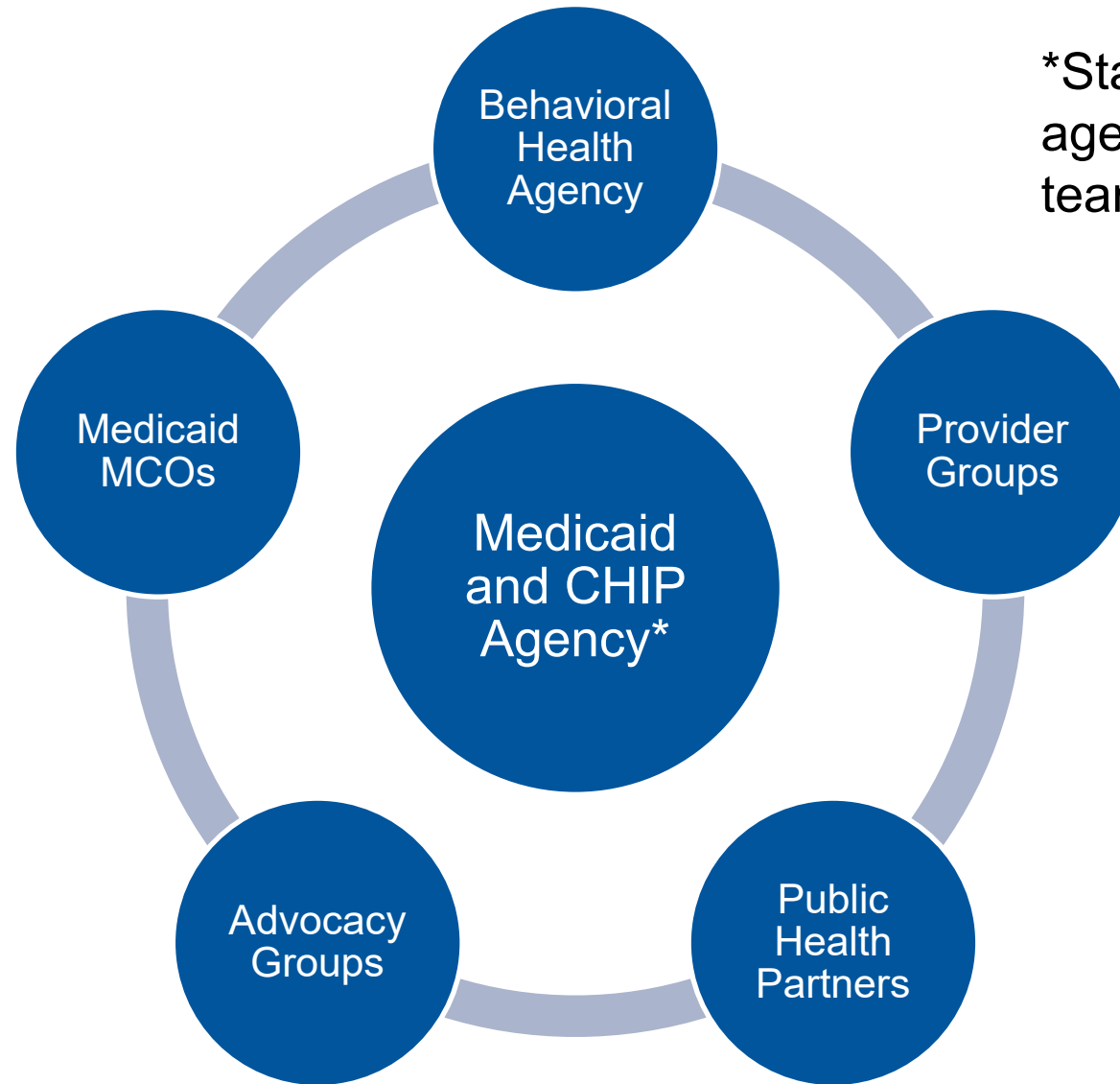
# Improving Behavioral Health Follow-up Care Affinity Group: General Aim and Primary Drivers

Aim: By January 1, 2023, improve timeliness of follow up care for beneficiaries who are hospitalized or visit an emergency department for a mental health or substance use diagnosis.

## Primary Medicaid agency drivers

- State agency leadership
- Stakeholder collaboration
- Policy and payment
- Data exchange
- Equitable access to care

# Improving Behavioral Health Follow-up Care Affinity Group: Who Can Participate?



\*State Medicaid or CHIP agency must serve as state team lead or co-lead

# What Do Participants in Other State Affinity Groups Say?

Regular meetings helped state teams develop and remain on track with their goals.

Affinity groups provided a unique opportunity to learn about and share best practices with peer states.

Collaboration with QI advisors and subject matter experts allowed states to pursue high-impact structural and policy changes.



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# Completing the Expression of Interest (EOI) Form

Michaela Vine, Mathematica

# Improving Behavioral Health Follow-up Care Affinity Group: Participation Criteria

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- Support from Medicaid and CHIP leadership
- State team that includes behavioral health, quality improvement, and data staff
- Well-articulated goals
- Understanding of opportunities and challenges to improve care
- Access to data on beneficiaries with behavioral health conditions and current service use
- Current or future ability to report relevant Core Set measures (FUA-AD, FUH-CH/AD/HH, FUM-AD) and other metrics of interest
- Project lead ability commit approximately 10 to 15 hours each month to QI project

# EOI Form Questions



## Be brief and use data when you can

### 1. Participation goals

- Goals for participating, specifying data used to determine goals

### 2. State needs assessment

- Current delivery system for behavioral health services (e.g., fee-for-service, managed care, bundled payments, etc.)
- Relevant state health homes (i.e., SMI, SUD, SMI/SUD)
- Existing state strategies or initiatives used to ensure beneficiaries receive timely follow-up care after an acute inpatient admission or ED visit for a behavioral health condition
- Key challenges and opportunities related to behavioral health follow-up care



**Improving Behavioral Health Follow-up Care Affinity Group**  
**EXPRESSION OF INTEREST (EOI) FORM**

The Center for Medicare & Medicaid Services (CMS) is pleased to launch the **Improving Behavioral Health Follow-up Care Affinity Group** to support states in implementing quality improvement (QI) activities to improve access to and coordination of follow-up care for Medicaid and CHIP beneficiaries who are hospitalized or visit an emergency department for a mental health or substance use condition. Although timely follow-up care for this population leads to decreased suicidal ideation, reduced readmissions, improved medication adherence and decreased costs, states often fall short of the recommended timeframes for post-discharge treatment. As part of this affinity group, QI advisors and subject matter experts will provide technical assistance to state Medicaid- and CHIP-led teams through individualized and group meetings using QI tools to develop, implement, test, and scale up initiatives to improve the use of follow-up care among beneficiaries. For more information on the affinity group, please see the fact sheet available on Medicaid.gov: <https://www.medicare.gov/medicaid/quality-of-care/improvement-initiatives/behavioral-health-learning-collaborative/index.html>.

Please complete the [online EOI form](#) by 8:00 PM ET, Thursday, July 15, 2021.

Contact Information	
Team lead name (Medicaid agency staff must be lead or co-lead):	Title:
Agency Name:	
Mailing address:	
Email:	Phone:

1. **Participation Goals:** Briefly share your goals for participating in this affinity group. Include any data that you may have used to determine your goals.

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\_\_\_\_\_

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# EOI Form Questions (2)

## 3. Managed care

- Current or previous improvement efforts related to behavioral health follow-up care (i.e., PIPs, quality strategy objectives, EQRO review of related metrics)
- Whether behavioral health services are carved out of or included in managed care

## 4. Access to behavioral health follow-up care data

- Access to and use of measures of behavioral health follow-up care (i.e., Core Set FUA-AD, FUH-CH/AD/HH, FUM-AD measures and other metrics of interest)
- Access to and use of admissions, discharge and transfer (ADT) data

## 5. Early project ideas

- Project ideas that state is considering (note: a predetermined intervention or strategy is **not** a requirement)

## 6. Your team

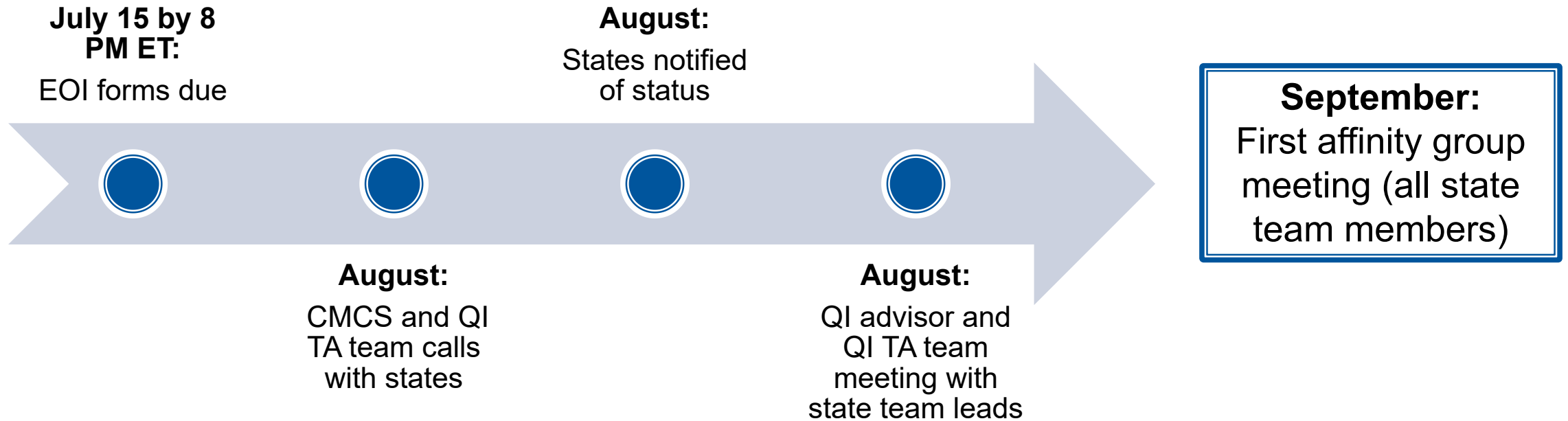
- Names, titles, and affiliations of proposed team members
- Team lead must be from the state Medicaid agency
- Include staff who can help gather and interpret data

## 7. Senior leadership support

- States must have the support of the Medicaid or CHIP director, medical director, or other senior leadership in the agency



# Timeline for EOI Review and Startup



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# Announcements and Next Steps

Mira Wang, Mathematica

## Announcements and Next Steps

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- Webinar recording and slides will be posted on the [Medicaid.gov Improving Behavioral Health Follow-up Care Learning Collaborative Homepage](#)
- **Upcoming webinars**
  - Webinar #2: Leveraging Key Relationships in Improving Behavioral Health Follow-up Care : **Tuesday, June 29, 2021, 12:00 PM ET**
  - Webinar #3: Using Data to Improve Access to Behavioral Health Follow-up Care: **Thursday, July 15, 2021, 3:00 PM ET**
- Register for remaining webinars at the [Medicaid.gov Improving Behavioral Health Follow-up Care Learning Collaborative Homepage](#)

## **Announcements and Next Steps (continued)**

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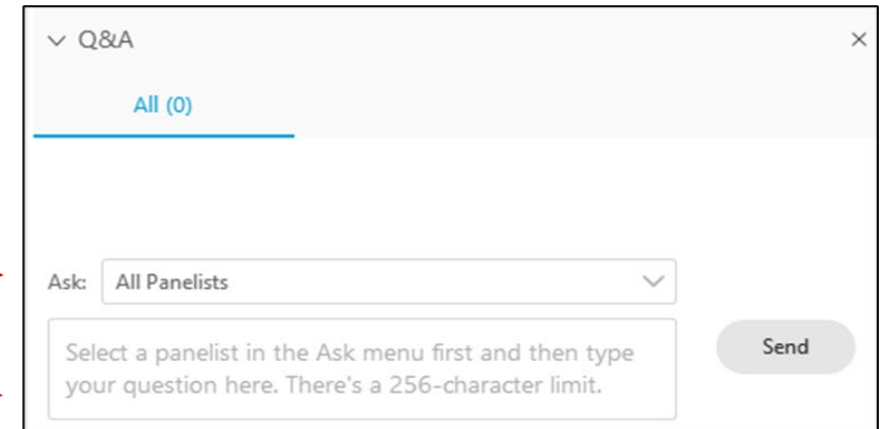
- **Affinity Group Fact Sheet and EOI form are available at the [Medicaid.gov Improving Behavioral Health Follow-up Care Learning Collaborative Homepage](#)**
- **Affinity Group EOI forms are due Thursday, July 15, 2021, 8:00 PM ET**

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# Questions

# How to Submit a Question

- Use the Q&A function to submit questions or comments.
  - To submit a question or comment, click the Q&A window and select “All Panelists” in the “Ask” menu
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# Thank you for participating!

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- **Please complete the evaluation as you exit the webinar**



- **If you have any questions, please email**

[MACQualityImprovement@mathematica-mpr.com](mailto:MACQualityImprovement@mathematica-mpr.com)



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# Improving Behavioral Health Follow-up Care Affinity Group FAQ's



# **Improving Behavioral Health Follow-up Care Affinity Group State Team**

- **Who should be on our state team?**

- State teams should be led by a staff member from the state’s Medicaid or CHIP program
- Given the focus on cross-agency collaboration, the team should also include members of the state’s behavioral health agency
- We also recommend that the team include at least one member who works with or has access to data on beneficiaries with behavioral health conditions and current service use

- **Can our state team include partners outside of the state’s Medicaid/CHIP and behavioral health agencies?**

- Yes! CMS encourages states to partner with other behavioral health stakeholders, including Medicaid managed care plans, health care providers, Medicaid Health Home program staff, and/or other stakeholders

# Improving Behavioral Health Follow-up Care Affinity Group Team Capabilities

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- **You mentioned including a team member who has access to data. What are the requirements around data?**
  - Data is foundational to QI initiatives. For this reason, we strongly recommend the state team be able generate and share measures of behavioral health follow-up care (i.e., Core Set FUA-AD, FUH-CH/AD/HH, and/or FUM-AD measures or other similar metrics) to help understand your state team's QI project
  - Your state team will be asked to submit data that reflect your improvement efforts on a monthly basis

# Improving Behavioral Health Follow-up Care Affinity Group Time Commitment

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- **What kind of a time commitment should state teams expect?**
  - Based on prior affinity groups, we estimate that the project lead ability will need to commit approximately 10 to 15 hours each month to QI project
  - Other primary team members will need several hours each month to attend workshops, participate in coaching hours, work on or prepare materials related to the affinity group, and work with stakeholder partners on the QI project

# EOI Leadership Signoff

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- **The EOI form requests that state teams provide the contact information for senior leadership in the agency who supports the project's goals. Who would qualify as a senior official?**
  - Senior officials may include the state's Medicaid director, Medicaid medical director, or other senior leadership in the agency, such as Director of Medicaid Managed Care (if your QI project will be implemented as part of managed care work) or a Director of Quality Improvement.