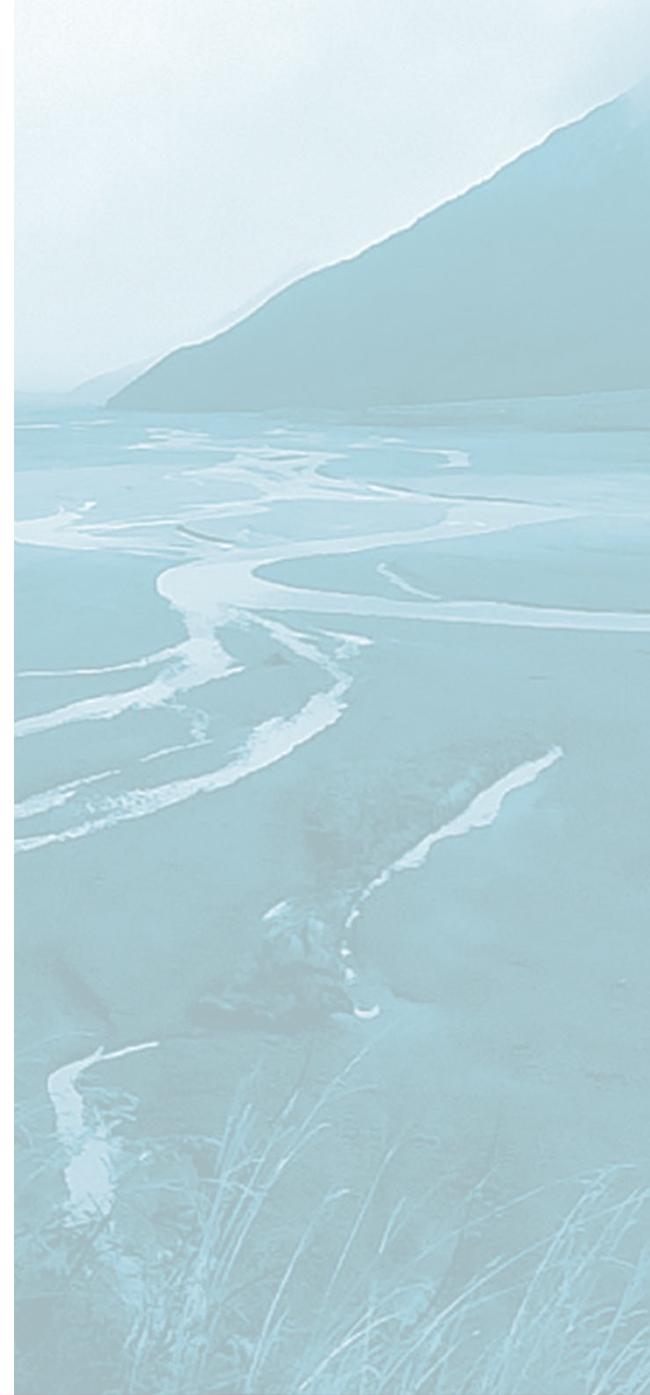


# The Delta Center for a Thriving Safety Net

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Opening Doors and Creating Momentum through Partnerships in Primary Care and Behavioral Health



# My Background

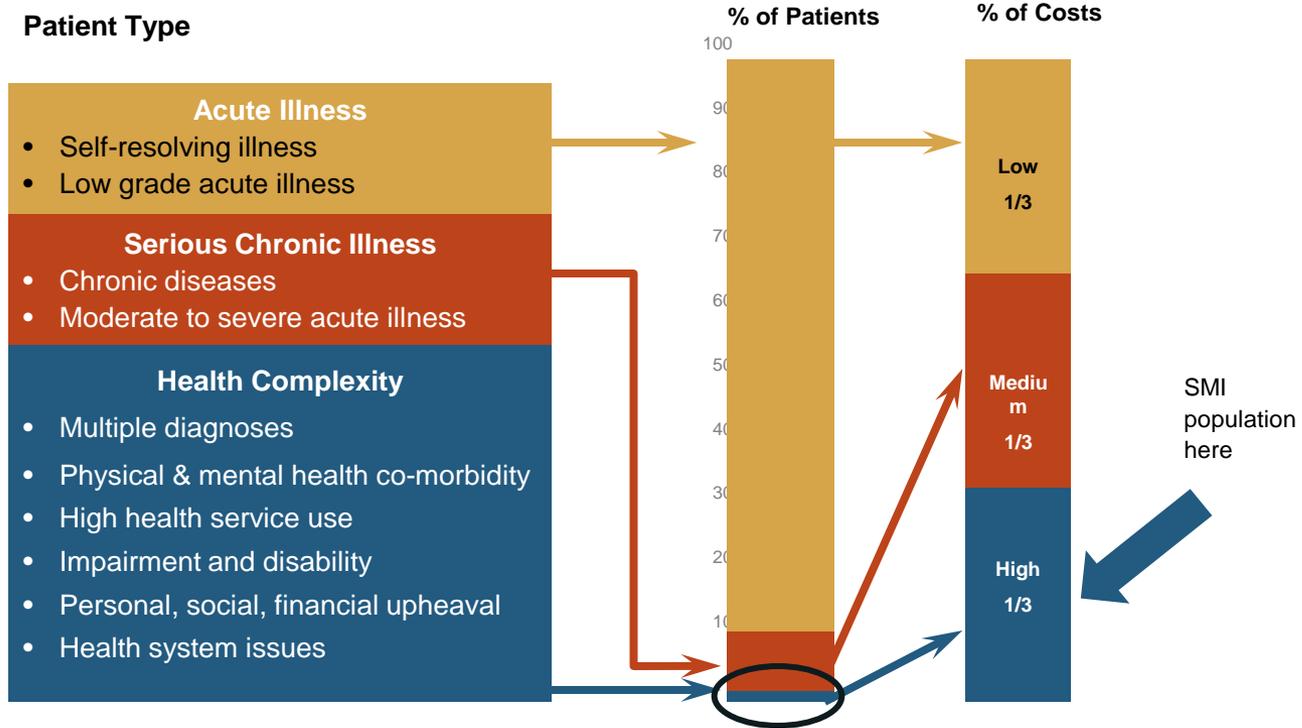
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- Medical Director for National Council for Behavioral Health
- Practicing Psychiatrist in a Community Health Center
- Distinguished Professor, Missouri Institute of Mental Health, University of Missouri St. Louis
- Previously
  - Medicaid Director for Missouri
  - Medical Director Missouri Department of Mental Health

# Overview: THE PROBLEM

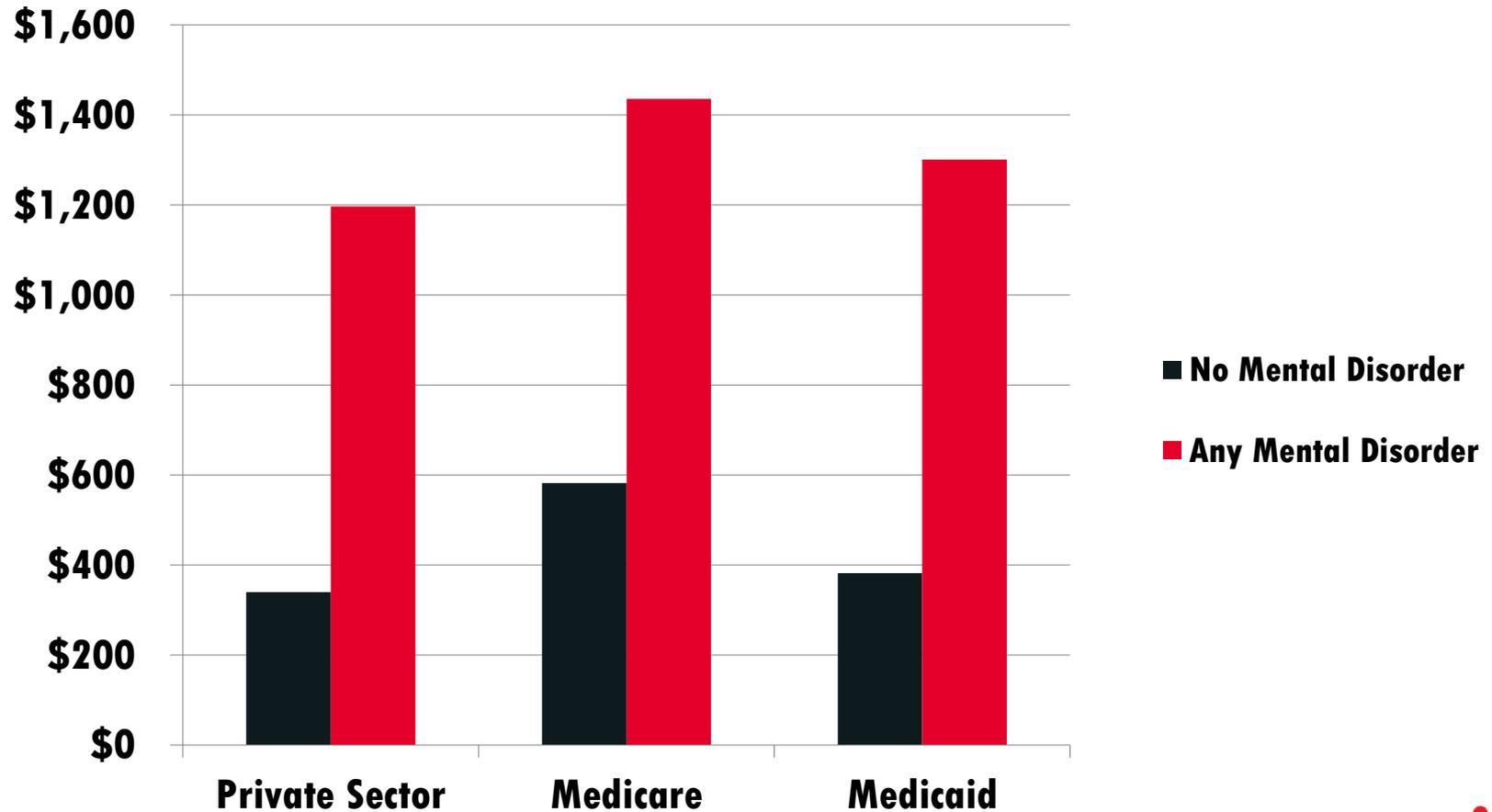
- Increased morbidity and mortality associated with serious mental illness (SMI)
- Increased morbidity and mortality largely due to preventable medical conditions
- Metabolic disorders, cardiovascular disease, diabetes mellitus
- High prevalence of modifiable risk factors (obesity, smoking)
- Epidemics within epidemics (e.g., diabetes, obesity)
- Some psychiatric medications contribute to risk
- Established monitoring and treatment guidelines to lower risk are underutilized in SMI populations

# Cost of Health Complexity



Adapted from Meier DE, J Pall Med, 7:119-134, 2004

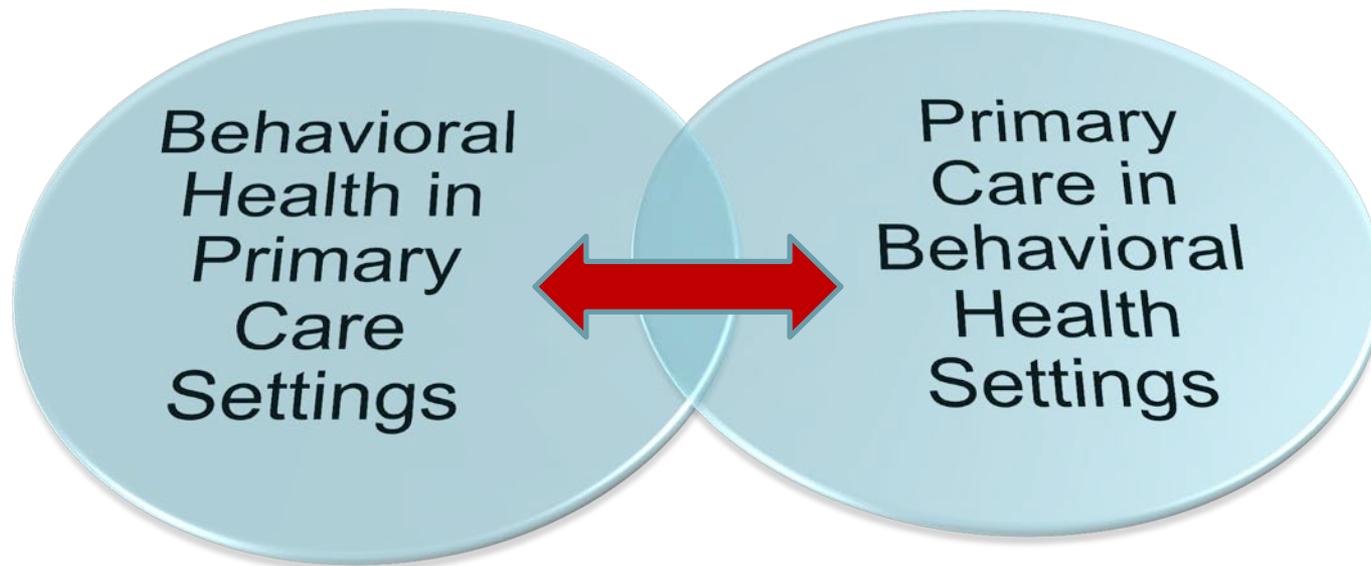
# Per Member Per Month Costs



# Integrated Care Definition:

- The care that results from a practice team of primary care and behavioral health clinicians working with patients and families, using a systematic and cost-effective approach to provide patient-centered care for a defined population.
- Focus is on the integration of services
- This may or may not involve the merging of organizations

# Bidirectional Integration



# FQHC/CMHC Integration Initiative

- Design
  - Seven partnerships funded at \$200,000 a year
  - Each partner gets \$100,000/ year
    - Can only use funding to buy services from their other partner
    - Services bought must be delivered at buyers location
    - Services bought must be recorded on buyers chart
  - Technical Assistance Team (supported by a grant from the Missouri Foundation for Health)

# Health Home Outcomes

- Lower Blood pressure, Cholesterol, and better Blood Glucose control
- Better Medication adherence
- Lower ER and Hospital utilization
- Healthier Lifestyles – less smoking, more active,
- Saved \$59.1 Million
- Better working relationships between Healthcare Providers

# Integration Initiative Recurrent Themes on the Path to Integration

**Building  
Relationships**

**Communication**

**Understanding  
the Model**

**Physical  
Structure  
Modifications**

**Hiring and  
Retaining the  
Right Staff**

**Revise state  
regulations  
to support  
the BHC  
Model**

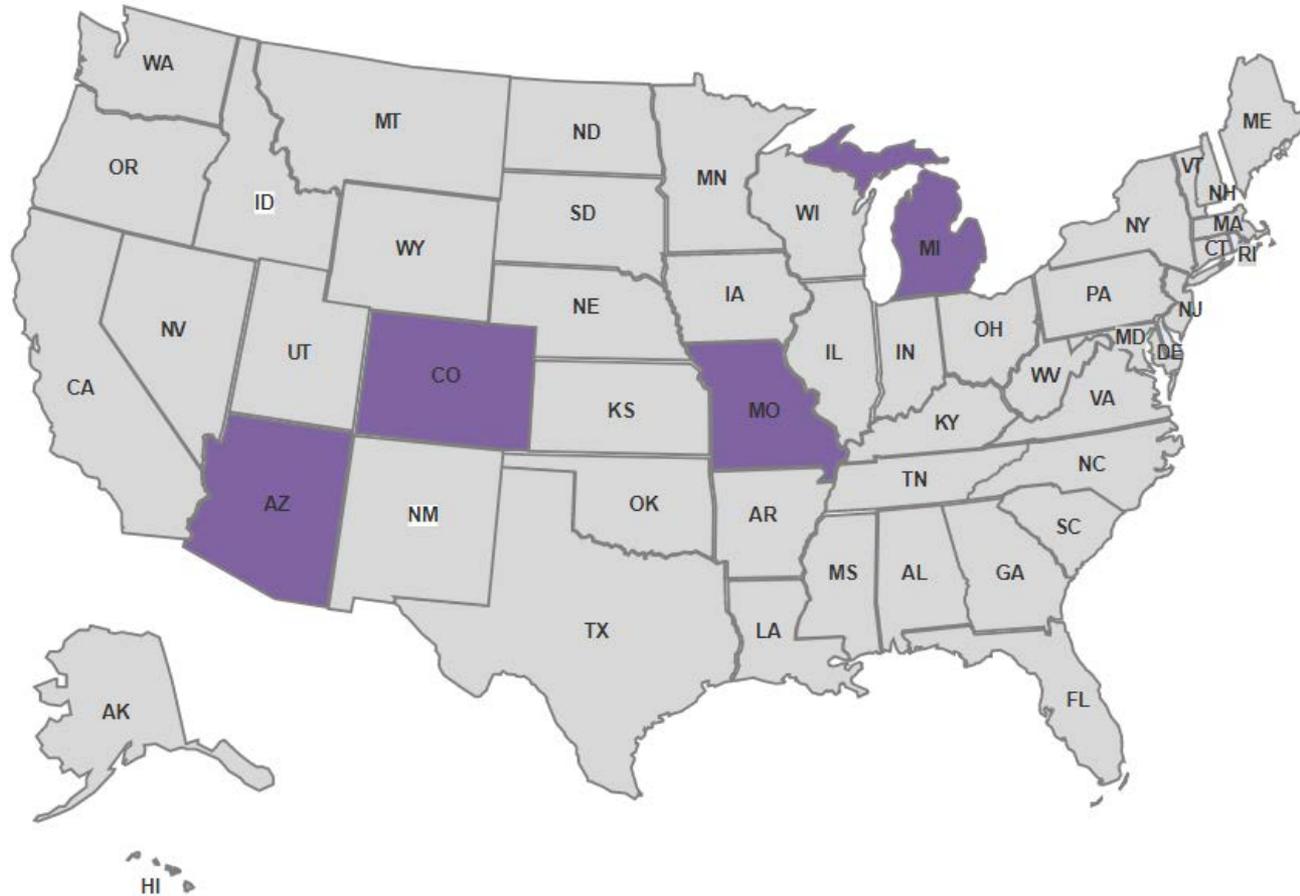
**Billing Codes  
need revision  
to support  
Integration**

# What Makes it Possible?

- A Relationship of basic trust between:
  - Department of Mental Health
  - MO HealthNet (Medicaid)
  - State Budget Office
  - MO Coalition of CMHCs
  - MO Primary Care Association
- Transparent use of data instead of anecdotes to explore and discuss issues
- Willingness of all partners to tolerate and share risk
- Principled negotiation and Motivational Interviewing



# Partnerships Across the US



# Integrated Delivery System



# Partnership Principles

## DO

- Ask about their needs first
- Give something
- Assist wherever you can
- Make it about the next 10
- Pursue common interest
- Reveal anything helpful
- Take one for the team

## DON'T

- Talk about your needs first
- Expect to get something
- Limit assistance to a project
- Make it about this deal
- Push a specific position
- Withhold information
- Let them take their lumps

# Partnership Strategies

- Systematically discuss the long term relationships as more important than the current project
- Seek to build mutual dependency and vulnerability. Automotous invulnerable organizations usually behave badly
- Hire each others middle managers whenever the opportunity arises

# Partnership Mentor - Dancing



- You have to know your partners location, center of gravity, and velocity before doing anything
- It's about opening doors and getting out of the way, not by pushing or pulling in a particular direction
- Successful motion is about where your center goes not what happens with your extremities (demonstration projects are a waste of time)

# Partnership Mentor - Dancing

- Communicating clear and consistent intentionality is essential
- You have to lead at the level that your partner is able to follow
- Really skilled partners switch off who leads and who follows
- If your partner doesn't look good it's your fault
- Always thank your partner no matter how well or poorly things went

# Leadership Mentor - Pharma

- Repeat your message relentlessly
- Segment your audience and tailor your leadership message for each audience - everyone doesn't respond to the same images and motivations
- Communicate a lot more about the successes than the shortcomings
- Small gifts help a lot
- Sometimes reality is a group consensual delusion - if you can get everybody to agree that something is so, then it becomes so

# What We Learned

- Effective Leaders Are Unrealistically Optimistic
- Move opportunistically - it is easier to influence the direction of momentum than to create momentum
- Reserve time to get to know ostensibly unrelated organizations and industry sectors - you will discover resources and opportunities that you never knew existed
- Organizational culture and professional culture are really important
- Rituals are important and powerful

# Most Important Principle

- Perfect is the enemy of good
- Use an incremental strategy - big sweeping change scares people
- If you try to figure out a comprehensive plan first you will never get started
- Error on the side of action - Apologizing for a failed prompt attempt is better than is better than apologizing for missed opportunity

# Vision for the Future



# Population Health: A Vision for the Future

- The health of the population as measured by health status indicators and as influenced by social, economic and physical environments, personal health practices, individual capacity and coping skills, human biology, early childhood development, and health services (Dunn and Hayes, 1999).
- A conceptual framework for thinking about why some populations are healthier than others as well as the policy development, research agenda, and resource allocation that flow from it (Young, 2005).

# Population-Based Care

- Don't rely solely on patients to know when they need care and what care to ask for and from whom - use data analytics for outreach to high need/utilizer patients
- Don't focus on fixing all care gaps one patient at a time - choose selected high prevalence and highly actionable individual care gaps for intervention across the whole population
- The population-based health care provider is the public health agency for their clinic population

# Population Management Principles

- Population-based Care
- Data-driven Care
- Evidence-based Care
- Patient-centered Care
- Addressing Social Determinates of Health
- Team Care
- Integration of Behavioral and Primary Care

# Partnership Activity



# Review of Partnership Principles

## DO

- Ask about their needs first
- Give something
- Assist wherever you can
- Make it about the next 10
- Pursue common interest
- Reveal anything helpful
- Take one for the team

## DON'T

- Talk about your needs first
- Expect to get something
- Limit assistance to a project
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# In Your Groups

- Tell your partner about your organization
- Provide historical context and current areas of strength and pain points
- Identify areas of common overlap and areas where you compliment one another
- Write down the themes of this conversation